RENZOKUSEI SCANS IS RECRUITING AGAIN!

WE ARE CURRENTLY ACCEPTING APPLICATIONS FOR ALL POSITIONS. WE NEED J>E TRANSLATORS, AND CLEANERS THE MOST.

IF YOU'RE INTERESTED IN JOINING RENZOKUSEI SCANS, HEAD OVER TO OUR SITE AT RENZOKUSEISCANS.BLOGSPOT.COM/

The Reader's Choice

Hello, manga readers!

Is one of your favorite mangas currently dropped, or a considerably stalled project? Would you like to see it picked up again? Then look no further!

The Reader's Choice is an event that we are holding just for that. Starting again on February 15th, we will be taking requests specific to this event. At the end of the time frame, whichever series has the most votes, we will pick up!

So, how do you request your manga? Just head over to this URL for full information:

http://tinyurl.com/thereaderschoice

Renzokusei Scans

http://renzokuseiscans.blogspot.com/
#renzokusei @ irc.irchighway.net
@rzkscans

http://roankun.wordpress.com/

Saijou no Meii
Chapter 34 - A Skilled Outsider

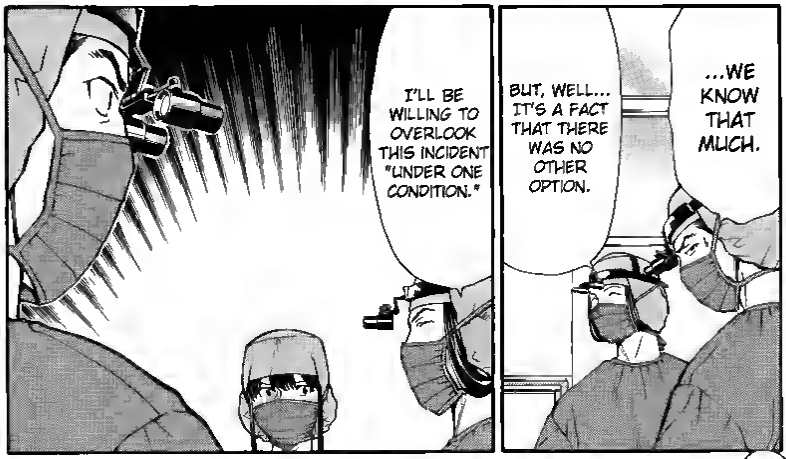
Raw Provider
SILENTGAIA
Translator
ROANKUN
Proofreader
DEREK
Cleaner
DEREK
Redrawer
DEREK
Typesetter
DESOLATEONE
Quality Check
ROANKUN, DEREK

CHAPTER 34
A SKILLED OUTSIDER

OK...
THE SURGERY IS DONE
THANKS FOR ALL YOUR HARD WORK, SAIJOU-SENSEI.
WE'LL STAY WITH THE BABY UNTIL THE ANESTHESIA WEARS OFF, SO PLEASE GO BACK TO YOUR ROOM.
SENA-SENSEI, ESCORT SAIJOU-SENSEI TO HIS ROOM.
OKAY.

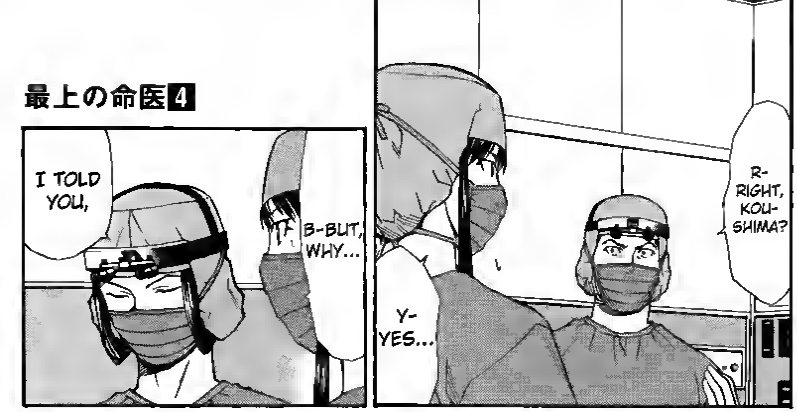
SAKAMOTO-SENSEI, KOUSHIMA-SENSEI... REGARDING THIS INCIDENT...
NOW THEN...
DID YOU TWO HEAR HOW MATSUNAKA-SENSEI EXPLAINED THIS TO THE PATIENT'S PARENTS BEFORE THE OPERATION?
WELL, HE DID TELL THEM THE TRUTH.
SERIOUSLY, WHAT A THING TO DO.
IN OTHER WORDS, THEY WERE FORCED TO GIVE THEIR CONSENT, HUH?
BUT, IT'S JUST... IN THAT KIND OF SITUATION, THE PARENTS DIDN'T HAVE ANY OTHER CHOICE, SO...

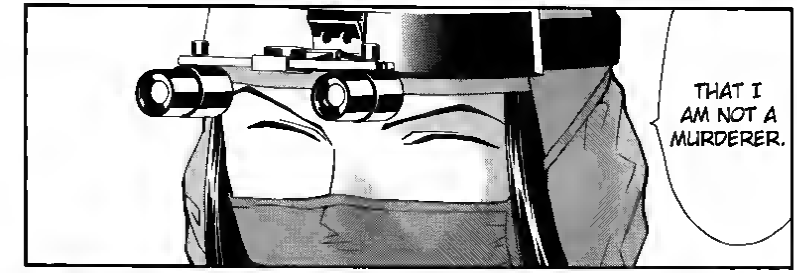
IF THE SURGERY WASN'T SUCCESSFUL, WE COULD HAVE BEEN SUED AND THAT WOULD HAVE BEEN A REALLY BIG PROBLEM...
EVEN THOUGH THE SURGERY WAS SUCCESSFUL, WE CAN'T JUST SAY EVERYTHING'S GOOD.


...WE KNOW THAT MUCH.
BUT, WELL... IT'S A FACT THAT THERE WAS NO OTHER OPTION.
I'LL BE WILLING TO OVERLOOK THIS INCIDENT "UNDER ONE CONDITION."

O-OF COURSE.

IS THAT FINE?
.....!
.....!


R-RIGHT, KOUSHIMA?
Y-YES...
B-BUT, WHY...
I TOLD YOU,


THAT I AM NOT A MURDERER.

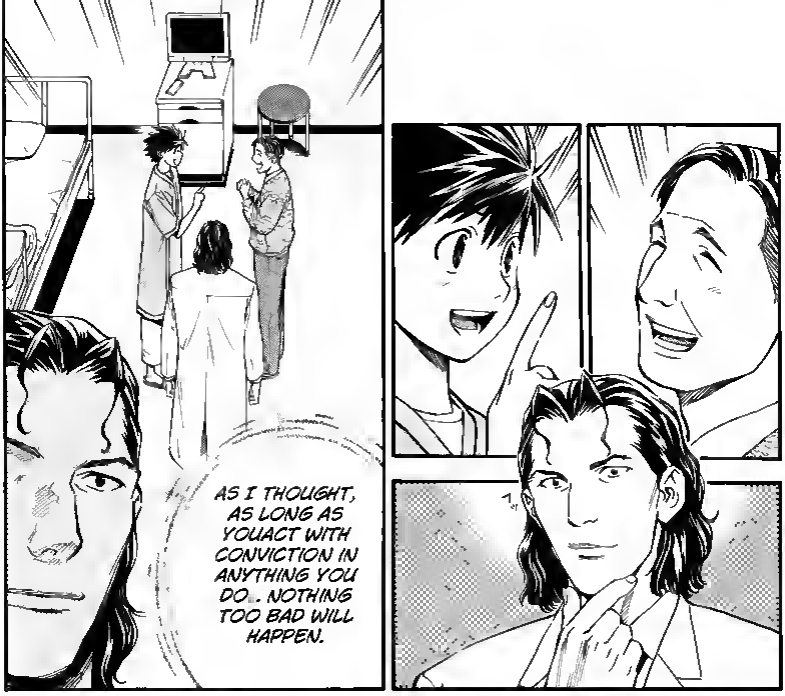
I AM NOT CHOOSY OF THE MEANS TO FULFILL MY OBJECTIVE, BUT I AM NOT A DEVIL AS TO DIRECTLY LAY A HAND ON SUCH A PATIENT.
IF I WERE TO SAY IT LIKE SAIJOU-SENSEI: "THAT'S MY RULE."
.....

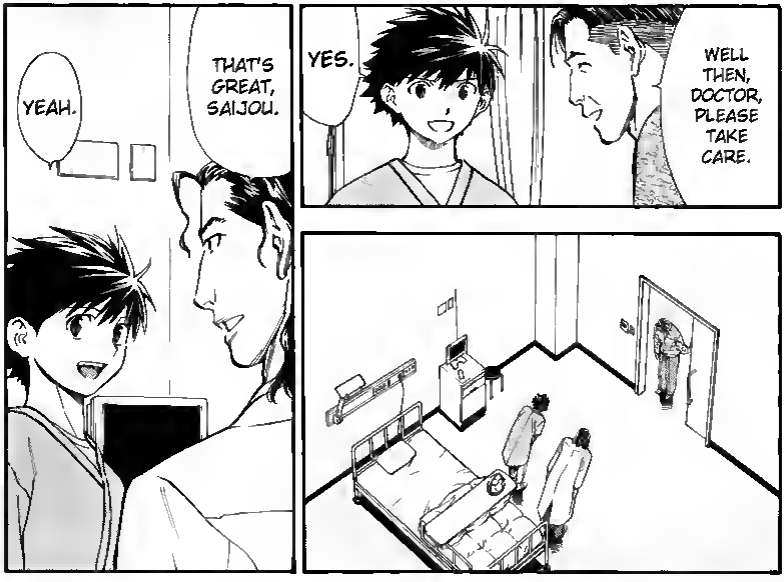
I MAY BE WILLING TO OVERLOOK IT, BUT THERE IS A CONDITION.
HMPH!
T-THANKS. I'LL CONSIDER THIS A DEBT.
IT'S MUCH TOO EARLY TO EXPRESS YOUR GRATITUDE
YOU CAN PAY YOUR DEBT THROUGH THAT.
?
?

EH?
HE SAID HE WILL OVERLOOK THIS INCIDENT.
...IN OTHER WORDS, SAIJOU, THERE'S NO NEED FOR YOU TO WORRY ANYMORE
SO DON'T WORRY ANYMORE, EAT THIS, AND TAKE IT EASY.
It's a gift from everyone
YEP.
REALLY?
7
THAT HAS ALSO BEEN TAKEN CARE OF.
But to be honest, I'm more scared of being scolded by Ayame rather than some punishment or inspection.
Ha ha ha
YEAH ...
PROB-ABLY.
IN 24 HOURS, YOU'LL BE UNDER-GOING ECG...
AND THEN ANGIOGRAPHY AFTER THAT?

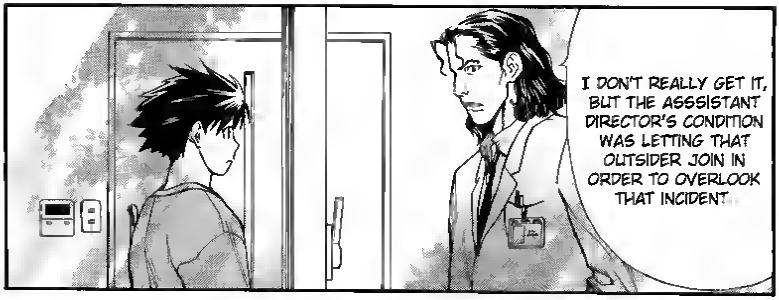
IF NEEDED, KOUSHIMA WILL INJECT HIM WITH ANESTHESIA
I-ISN'T THAT GOING TOO FAR...?
RIGHT NOW, THOSE TWO ARE DOING THEIR BEST TO HOLD OFF AYAME.
UH... I'M SAIJOU ...?
EXCUSE ME.
UM, WHICH ONE OF YOU IS SAIJOU-SENSEI ...?
AH.
I'M THE FATHER OF THE BABY THAT YOU OPERATED ON TODAY.
AH, HELLO.

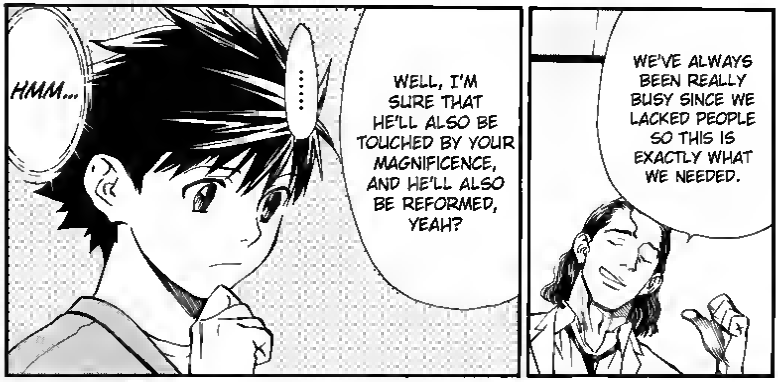
OF COURSE, IN THE BEGINNING, I WAS VERY ANXIOUS WHEN I HEARD THAT A SICK DOCTOR WOULD BE THE ONE IN CHARGE, BUT...
NO, NO, PLEASE.
I am very sorry. Even in this condition, I have operated on your precious child...
WHAT I HEARD AFTERWARDS, LIKE HOW THE WAY YOU OPERATED WAS AMAZING, AND HOW IT COULDN'T BE SEEN ANYWHERE IN THE WORLD. .
ACTUALLY, THAT WAS THE FIRST CHILD WE'VE BEEN BLESSED WITH AFTER 15 YEARS OF MARRIAGE...
NO, REAL-LY...
I REALLY CAN'T THANK YOU ENOUGH.

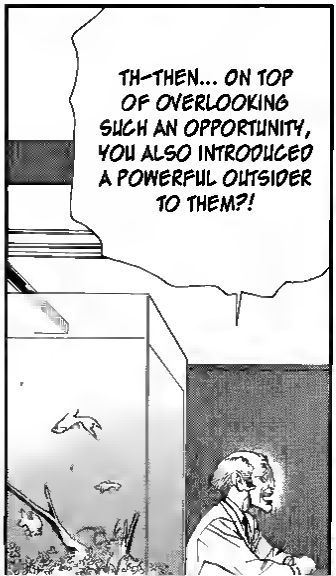

AS I THOUGHT, AS LONG AS YOUACT WITH CONVICTION IN ANYTHING YOU DO... NOTHING TOO BAD WILL HAPPEN.


THAT'S GREAT, SAIJOU.
YEAH.
YES.
WELL THEN, DOCTOR, PLEASE TAKE CARE.

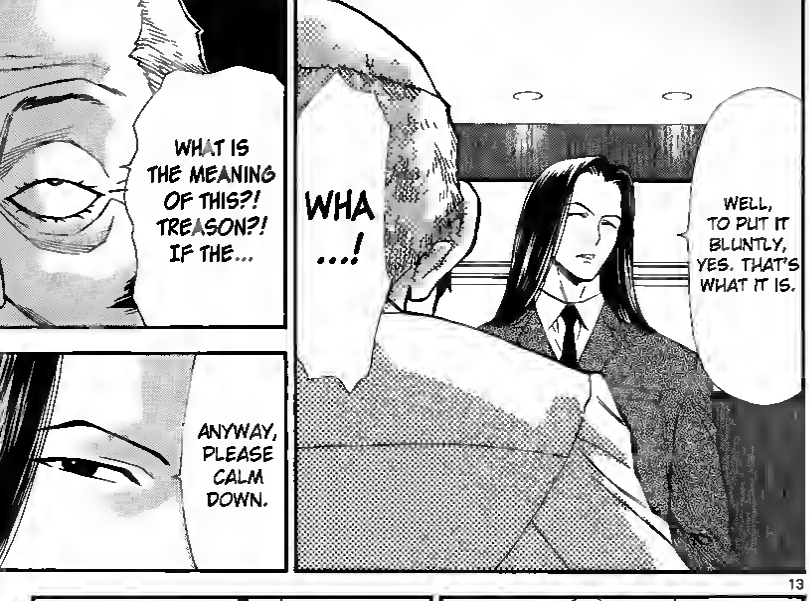
A NEW ENTRANT...
STARTING TOMORROW, THERE SHOULD BE ONE NEW ENTRANT COMING, SO WE'LL BE ABLE TO MAKE DO WITHOUT HAVING TO RELY ON YOU.
BUT, DON'T WORRY ABOUT THE PATIENTS FOR A WHILE.
FOR NOW, YOU SHOULD PRIORITIZE GETTING WELL FIRST...
WE'VE ALREADY HAD A NUMBER OF YOUNG ONES FROM OUR HOSPITAL COME, BUT NONE OF THEM WERE AS CAPABLE AS YOU.
STUPID.
AAH, YOU MEAN THOSE THREE FROM OUR .
THE NEW ENTRANT IS SOMEONE THE ASSISTANT DIRECTOR RECOMMENDED. A SKILLED OUTSIDER.


I DON'T REALLY GET IT, BUT THE ASSSISTANT DIRECTOR'S CONDITION WAS LETTING THAT OUTSIDER JOIN IN ORDER TO OVERLOOK THAT INCIDENT.

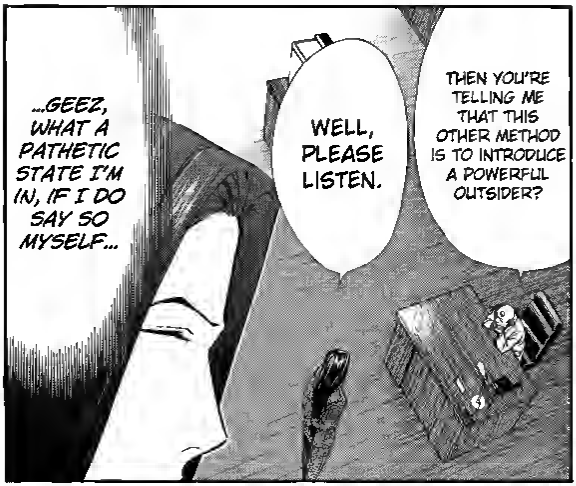

HMM...
WELL, I'M SURE THAT HE'LL ALSO BE TOUCHED BY YOUR MAGNIFICENCE, AND HE'LL ALSO BE REFORMED, YEAH?
WE'VE ALWAYS BEEN REALLY BUSY SINCE WE LACKED PEOPLE SO THIS IS EXACTLY WHAT WE NEEDED.

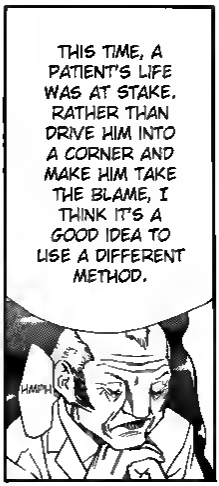

TH-THEN... ON TOP OF OVERLOOKING SUCH AN OPPORTUNITY, YOU ALSO INTRODUCED A POWERFUL OUTSIDER TO THEM?!

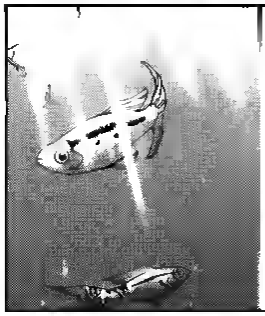
WH-WHAT DID YOU SAY?!

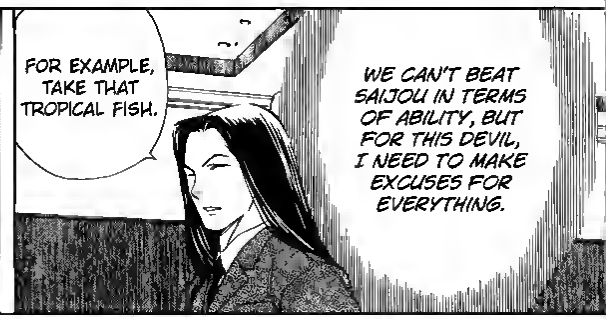

WHAT IS THE MEANING OF THIS?! TREASON?! IF THE...
ANYWAY, PLEASE CALM DOWN.
WHA ...!
WELL, TO PUT IT BLUNTLY, YES. THAT'S WHAT IT IS.

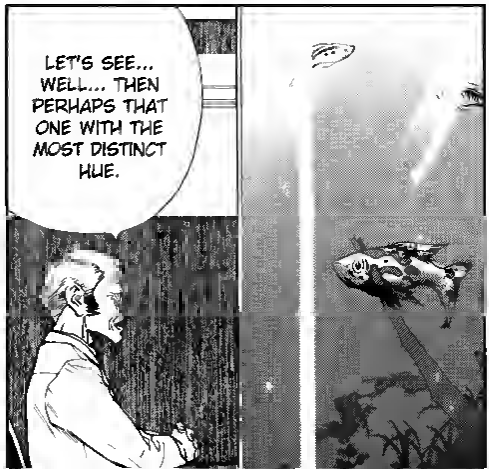
...
SPEAKING OF RESULTS, THE SURGERY THIS TIME WAS A BIG SUCCESS. THERE MAY BE THOSE WHO PRAISE SAIJOU, BUT THOSE WHO'D DENY HIM ARE VERY FEW.
IN TRUTH, EVEN IF I HAD TAKEN SAIJOU'S INCIDENT THIS TIME AS A PROBLEM, THERE WOULDN'T HAVE BEEN MUCH EFFECT.
LAST TIME, I HAD FAILED IN A SIMILAR CASE AS WELL...
THE ONES WHO REALLY NEED TO BE PUNISHED ARE THE ONES WHO PERFORM DANGEROUS LIFE-SAVING MEASURES JUST TO SHOW OFF THEIR SKILLS
THAT'S WHAT I THINK

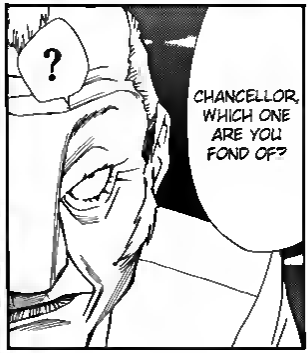

...GEEZ, WHAT A PATHETIC STATE I'M IN, IF I DO SAY SO MYSELF...
WELL, PLEASE LISTEN.
THEN YOU'RE TELLING ME THAT THIS OTHER METHOD IS TO INTRODUCE A POWERFUL OUTSIDER?

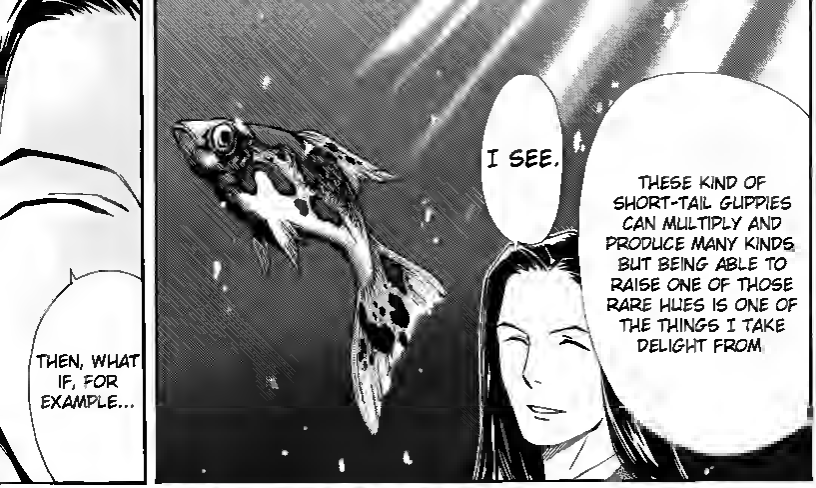

THIS TIME, A PATIENT'S LIFE WAS AT STAKE. RATHER THAN DRIVE HIM INTO A CORNER AND MAKE HIM TAKE THE BLAME, I THINK IT'S A GOOD IDEA TO USE A DIFFERENT METHOD.
HMPH

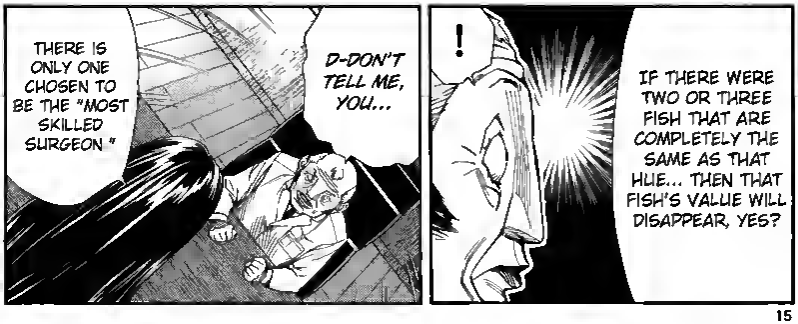


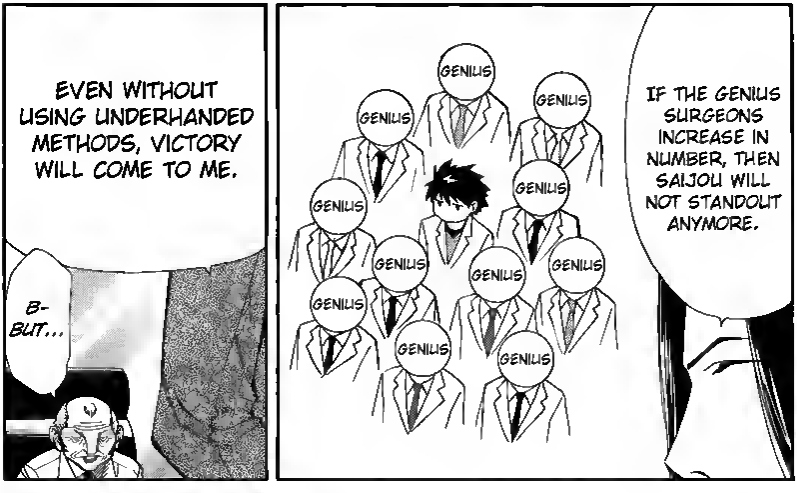

FOR EXAMPLE, TAKE THAT TROPICAL FISH.
WE CAN'T BEAT SAIJOU IN TERMS OF ABILITY, BUT FOR THIS DEVIL, I NEED TO MAKE EXCUSES FOR EVERYTHING.

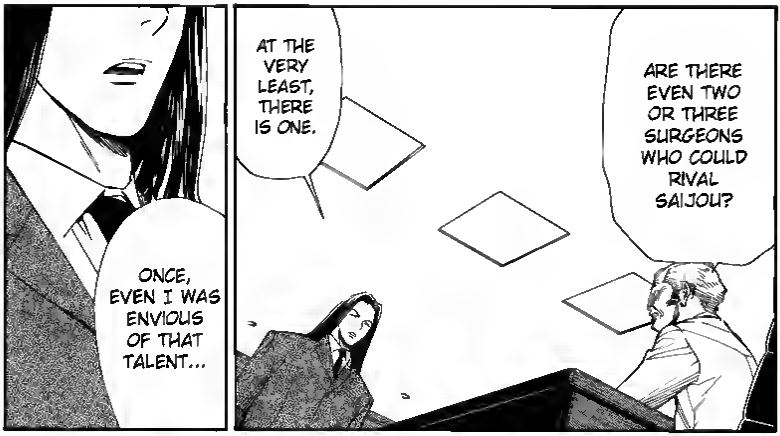

LET'S SEE... WELL... THEN PERHAPS THAT ONE WITH THE MOST DISTINCT HUE.

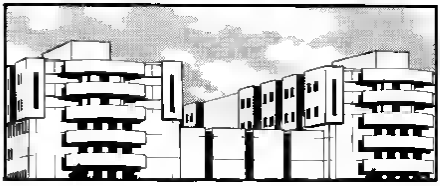

?
CHANCELLOR, WHICH ONE ARE YOU FOND OF?


THEN, WHAT IF, FOR EXAMPLE...
I SEE.
THESE KIND OF SHORT-TAIL GUPPIES CAN MULTIPLY AND PRODUCE MANY KINDS BUT BEING ABLE TO RAISE ONE OF THOSE RARE HUES IS ONE OF THE THINGS I TAKE DELIGHT FROM.

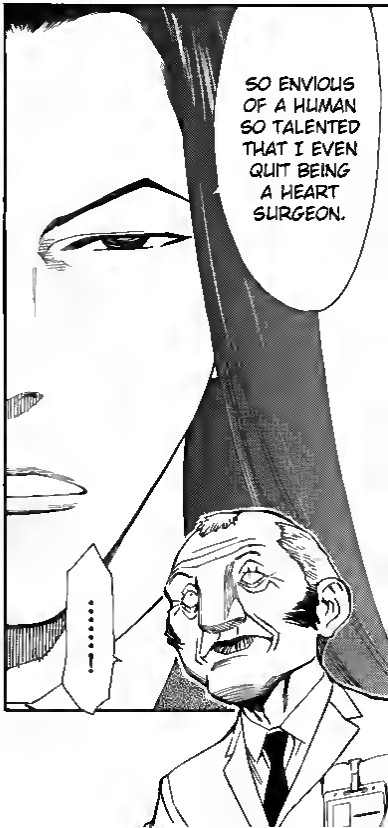

THERE IS ONLY ONE CHOSEN TO BE THE "MOST SKILLED SURGEON"
D-DON'T TELL ME, YOU...
!
IF THERE WERE TWO OR THREE FISH THAT ARE COMPLETELY THE SAME AS THAT HUE... THEN THAT FISH'S VALUE WILL DISAPPEAR, YES?


EVEN WITHOUT USING UNDERHANDED METHODS, VICTORY WILL COME TO ME.
B-BUT...
GENIUS
GENIUS
GENIUS
GENIUS
GENIUS
GENIUS
GENIUS
GENIUS
GENIUS
GENIUS
IF THE GENIUS SURGEONS INCREASE IN NUMBER, THEN SAIJOU WILL NOT STANDOUT ANYMORE.


ARE THERE EVEN TWO OR THREE SURGEONS WHO COULD RIVAL SAIJOU?
AT THE VERY LEAST, THERE IS ONE.
ONCE, EVEN I WAS ENVIOUS OF THAT TALENT...



I REALLY DON'T LIKE THIS!

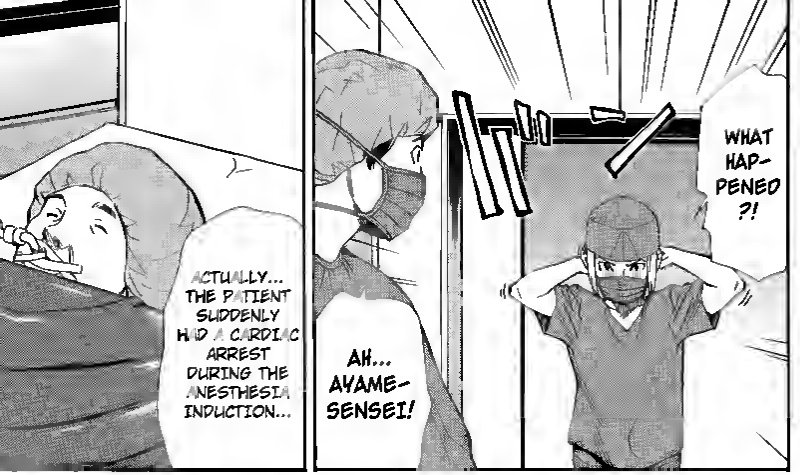

SO ENVIOUS OF A HUMAN SO TALENTED THAT I EVEN QUIT BEING A HEART SURGEON.
.....!

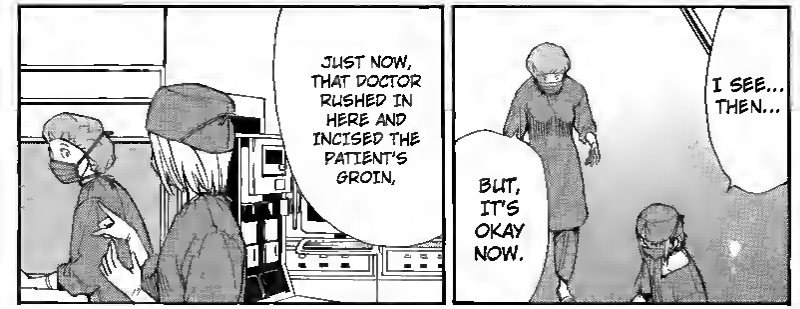
A NEW ENTRANT'S COMING TODAY! A NEW ENTRANT!
Y-Yeah ...
THANK GOODNESS... I THOUGHT HE WAS STILL MAD AT ME...
Wh-What is it?
OBVI-OUSLY!

NO BUTS AND MAYBES!
But you know, Ayame, maybe...
Huh ...
EVERYONE ELSE SEEMS TO HAVE BEEN FOOLED, BUT I'LL NEVER TRUST HIM!
I DUNNO IF HE'S SKILLED OR WHATNOT, BUT HE'S SOMEONE THAT MY OLDER BROTHER INTRODUCED.

EMERGENCY, EMERGENCY.
LISTEN UP, MIKO-TO.
CODE BLUE IN OPERATING ROOM NO. 6.
!!

I REPEAT CODE BLUE IN OPERATING ROOM NO. 6.
ROOM NO. 6?
TCH, A COLLEAGUE OF MINE SHOULD BE PEFORMING A CARDIOVAS-CULAR SUGERY TODAY.
WAIT RIGHT THERE, MIKOTO I'LL BE RIGHT BACK!
SH-SHOULD I GO, TOO?
OP. ROOM NO. 6
STUPID! IT'S AN ADULT'S HEART, AND IT DOESN'T HAVE TO BE YOU WHO'S THERE!
IF YOU GO, I'LL SERIOUSLY KILL YOU!!
K-KILL ME...?


ACTUALLY... THE PATIENT SUDDENLY HAD A CARDIAC ARREST DURING THE ANESTHESIA INDUCTION...
AH... AYAME-SENSEI!
WHAT HAP-PENED?!


JUST NOW, THAT DOCTOR RUSHED IN HERE AND INCISED THE PATIENT'S GROIN,
BUT, IT'S OKAY NOW.
I SEE... THEN...

WHO KNOWS? ACTUALLY, I DON'T REALLY...
SHE SEEMS TO BE QUITE CAPABLE, BUT WHO IS SHE?
HEY, YOU CAME!
DOING THAT TREAT-MENT IN SUCH A SHORT TIME...
HM...
AND CONNECTED THE FEMORAL ARTERY AND VEIN TO THE HEART-LUNG MACHINE...

SAIJOU NO MEII 4 END

FORGOTTEN SCANS

TRANSLATOR: BUNNIFIED
PROOFREAD:APHORIA
CLEANER: XASURA
TYPESETTER: M8T
QCER: MICHAEL

WEBSITE: FOS-SCANS.COM
FORUM: FORGOTTEN-SCANS.BOARDS.NET

/FORGOTTENSCANS.TUMBLR.COM

FORGOTTEN SCANS
WHAT?!
YOU'RE NOT JOINING FORGOTTEN SCANS?
WHAT ABOUT ALL OUR PROJECTS? WHO'S GOING TO CLEAN DORAEMON? WHO IS GOING TO TRANSLATE CHIBI MARUKO? WHO'S GONNA TYPESET SHIN-CHAN? WHO'S GONNA PROOF-READ ATASHINCHI? OMFG, SHINSETSU BOBOBO-BO BO-BOBO HAS BEEN ON HIATUS FOR FOREVER TOO, WHAT'RE WE GONNA DO ABOUT THAT IF WE DON'T HAVE ENOUGH MEMBERS? AND WHAT ABOUT ALL OUR FUTURE PROJECTS, LIKE HAKAIOU NORITAKA AND FULL AHEAD COCO? HUH? ALL OUR MEMBERS ARE ALREADY DYING OUT THERE, AND YOU'RE SAYING YOU DON'T WANT TO JOIN BUT STILL EXPECT US TO RELEASE STUFF? WHAT, YOU THINK I'M SUPERMAN? YOU EXPECT ME TO DO EVERYTHING BY MYSELF WHEN I'M ALREADY LIKE
OTHERWISE THIS ADMIN IS GOING TO GO CRAZY...
...YEAH, I THINK WE SHOULD JOIN...
JOIN.FORGOTTEN SCANS.NOW
WWW.FOS-SCANS.COM

AS MY ASSIS-TANT.
!
THAT'S WHAT I'D LIKE TO SAY, BUT MY BODY PROBABLY ISN'T UP TO IT RIGHT NOW
THAT'S BECAUSE I HAVE A CORONARY ARTERY BYPASS SURGERY THE DAY AFTER TOMOR-ROW.
YOU'VE ALREADY GOTTEN THE OPERATION DETAILS FROM AYAME, HAVEN'T YOU?
Ahahaha
AHAHA ?
HO-HOW IRRESPON-SIBLE!
SAYING SOMETHING LIKE THAT SO SUDDENLY, BUT NOT INTENDING TO FOLLOW THROUGH...
SORRY, SORRY.

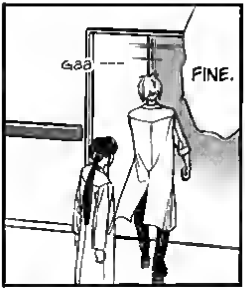
IF YOU WANT TO KNOW THE REASON WHY I SAID YOU HAVE A LOT TO LEARN, I'LL LET YOU CUT UP MY HEART
AND OF COURSE
IF THAT'S THE CASE, I HAVE A PROPOSAL
MISS-ING TRANSLA-TION
YOU'LL BE OPERATING WITH AYAME!
...
...

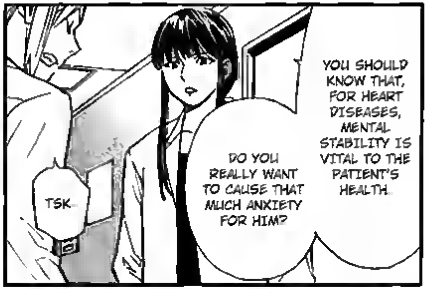
WHA...
WHAT DID YOU SAY!?
YOU WANT NATSUME TO BE THE ASSISTANT IN YOUR OPERATION?!
YUP.
IT'LL BE FINE. YOU'RE SIBLINGS, AFTER ALL.
TH... THAT'S RIDICULOUS!
SHE IS BOTH ME AND MY BROTHER'S SISTER.
A WOMAN WHO IS LIKE A DEVIL
AYAME-SENSEI DOESN'T SEEM TO BE MAKING SENSE, SOMEHOW.
whisper
TO BE ABLE TO SO CASUALLY SAY SOMETHING LIKE THAT EVEN THOUGH IT MAKES HIM LOOK BAD, THAT IS JUST LIKE AYAME.

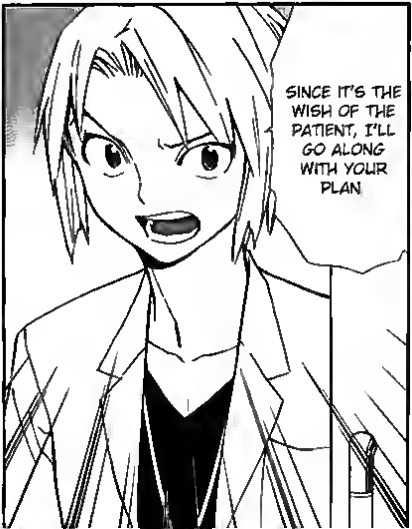
BUT I'M SURE THAT SHE'S VERY TALENTED.
TO HAVE TO OPERATE ON YOU TOGETHER WITH NATSUME...
ANYWAYS I WON'T GO ALONG WITH IT
HOLD ON AYAME.
THAT MAY BE SO, BUT IN THE FIRST PLACE SHE...
THAT'S WHAT I THINK
IF SHE LEARNS FROM AYAME, SHE'LL BECOME EVEN BETTER.
WHAT'S THIS ABOUT?
COULD YOU GIVE ME A MINUTE?

MIKOTO IS THE TYPE WHO WON'T CHANGE HIS MIND ONCE HE'S DECIDED WHAT'S MORE. HE IS A PATIENT RIGHT NOW

AND IF I DO?
I KIND OF UNDERSTAND WHAT IS GOING ON AFTER HEARING FROM SENA-SAN, BUT DO YOU REALLY INTEND TO TELL MIKOTO EVERYTHING?


Gaa ---
FINE.


TSK.
DO YOU REALLY WANT TO CAUSE THAT MUCH ANXIETY FOR HIM?
YOU SHOULD KNOW THAT, FOR HEART DISEASES, MENTAL STABILITY IS VITAL TO THE PATIENT'S HEALTH.


SINCE IT'S THE WISH OF THE PATIENT, I'LL GO ALONG WITH YOUR PLAN

OI, MIKOTO

KURU
THAT IS ALL
SO DON'T WORRY!
YEAH... SOMEHOW IT DIDN'T QUITE WORK..
AA.. WHEN HE SAYS DON'T WORRY... I FEEL MORE SCARED IS IT JUST ME?
THIS ISN'T LIKE YOU AT ALL.
I SOMEHOW ENDED UP HAVING TO PERFORM AN OPERATION WITH NATSUME.
HAA.. REALLY... THIS IS ALL YOUR FAULT.

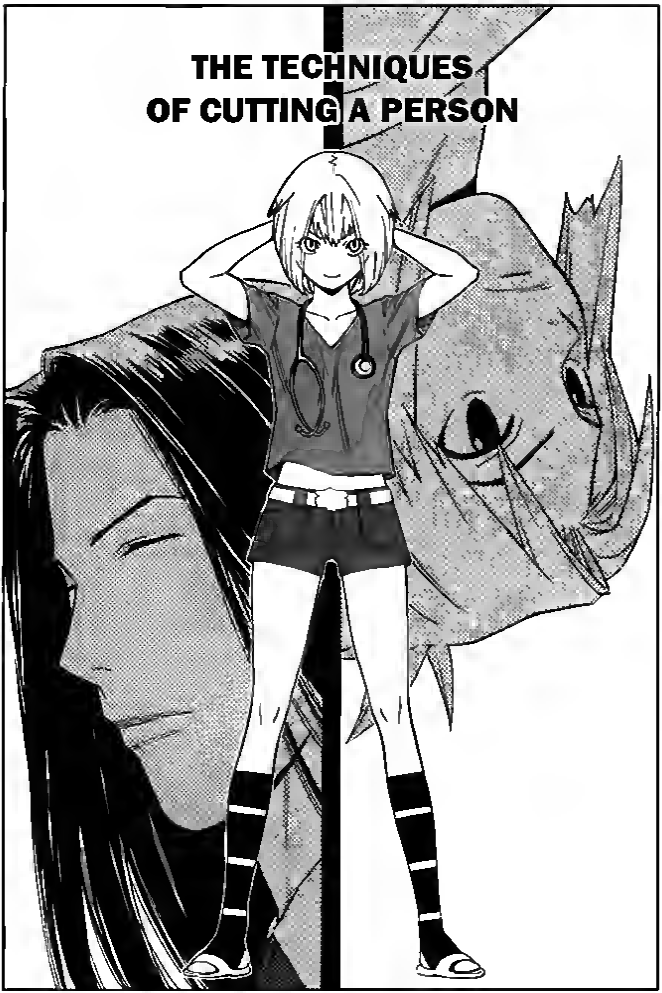
BUT... AT THE VERY LEAST, ANIKI WAS KILLED.
!?
MAYBE.
NO MATTER WHAT, FOR SOMEONE LIKE YOU TO BE KILLED AS SURGEON SEEMS IMPOSSIBLE
HE BROUGHT NATSUME TO ONE RIGHT AFTER SHE GRADUATED IN ORDER TO GIVE HER A LEARNING OPPORTUNITY.
YOU KNOW HOW MANU-FACTURERS OF MEDICAL PRODUCTS SOMETIMES HOST SURGERY WORK-SHOPS?
SINCE LONG AGO, ANIKI HAS BEEN ARROGANT. THAT GARBAGE THINKS HE WAS CHOSEN BY GOD
FROM THEN ON, ANIKI BECAME VERY STRANGE

LOOK HERE, WE'RE SIB-LINGS.
BUT AYAME, THAT IS JUST YOUR THEORY, CORRECT?
NATSUME MUST HAVE DONE SOME-THING DURING THAT OPERATION WORKSHOP TO SHATTER HIS PRIDE INTO PIECES.
HE IS UNLIKE THOSE PEOPLE WHO GET CARRIED AWAY WITH SELF-INTEREST AND PROTECTING THEMSELVES
BUT BECAUSE OF THAT ARROGANCE HE TAKES PRIDE IN HIS JOB AS A DOCTOR
NAT-SUME
EXACT-LY.
IF YOU ARE ALWAYS TOGETHER, YOU LEARN WHAT KIND OF CHARACTER THEY HAVE...
HE'S ALWAYS DISTANT.
AA-KUN GETS ALONG WELL WITH ME HOWEVER,
THAT'S WHY I ALSO KNOW WHAT SORT OF PERSON AA-KUN IS

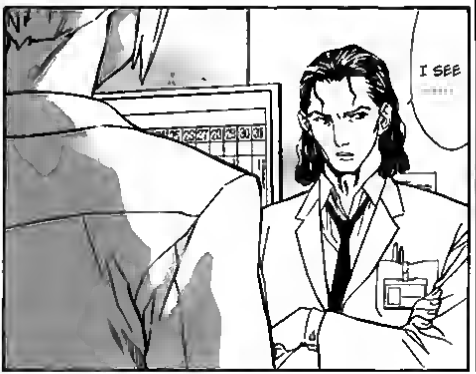
WE SIBLINGS WERE ALL BROUGHT UP TO HAVE AN INTEREST IN MEDICINE, BUT YOU WERE THE ONLY ONE WHO WASN'T NORMAL
HMPH. SO YOU KNEW
YOU ACTUALLY THINK I'M SOME KIND OF MONSTER, DON'T YOU?
TO BE HONEST, I'D SAY YOU AREN'T ACTUALLY A MONSTER, YOU ARE JUST AB-NORMAL
Please let my family fall ill.
YOU WANTED NOTHING MORE THAN TO SEE OPERATIONS LIVE, AND YOU EVEN WROTE ON A PAPER DURING THE STAR FESTIVAL THAT YOU WISHED YOUR FAMILY WOULD FALL ILL...
YOU HAD AN EXCESSIVE INTEREST IN OPERATIONS, AND WOULD DO NOTHING BUT DISSECT LIVING CREATURES FOR NO REASON, EVEN SAYING THEY WERE CUTE...
MR FROG'S HEART IS SO CUTE~
HMPH, DON'T MAKE ME LAUGH
NO MATTER HOW HARD YOU TRY TO APPEAR NORMAL ON THE SURFACE, YOU ARE ABNORMAL

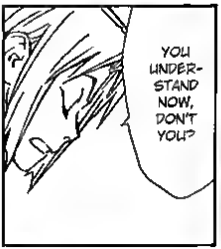
I KNOW WHAT HAPPENED; YOU WERE EVICTED FROM A HOSPITAL OVERSEAS FOR FAILING IN AN OPERATION.
YOU SAY THAT, BUT AA-KUN... AREN'T YOU NOTHING MORE THAN A MURDERER?
YOU!
IF IT WERE ME I WOULD NEVER HAVE MADE SUCH AN ERROR.
STOP IT, AYAME!
LISTEN UP YOU TWO. I KNOW THERE ARE LOTS OF THINGS BETWEEN YOU BOTH SINCE YOU BOTH ARE SIBLINGS BUT DON'T FIGHT DURING THE OPERATION
SHA
SHA
TSU
REALLY, THESE SIBLINGS
HUH? DURING THE OPERATION?
IF MIKOTO HEARS ABOUT IT AND GETS UPSET, THAT WOULD BE BAD

CHAPTER 35

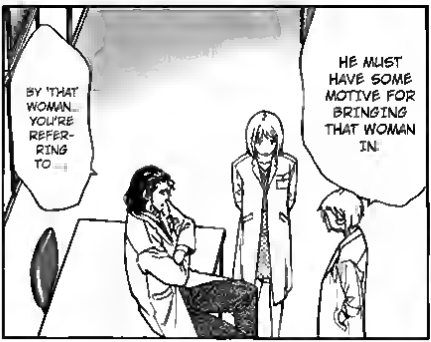


HE WILL BE ABLE TO HEAR.
?
IDIOT!
FIGHTING IS BAD EVEN IF HE CAN'T HEAR!
SINCE HE'LL BE PUT UNDER ANESTHESIA, SAIJOU-SENSEI COULDN'T POSSIBLY HEAR ANYTHING
Haa
IN SHORT...
ACTUALLY, MIKOTO WANTS TO USE EPIDURAL ANESTHESIA TOMORROW.
!
MIKOTO WILL BE AWAKE DURING TOMORROW'S OPERATION.
!

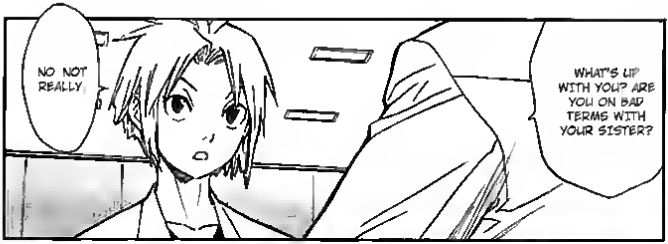

I SEE


YOU UNDERSTAND NOW, DON'T YOU?

YES
SO THAT CAPABLE NEWCOMER IS YOUR YOUNGER SISTER.

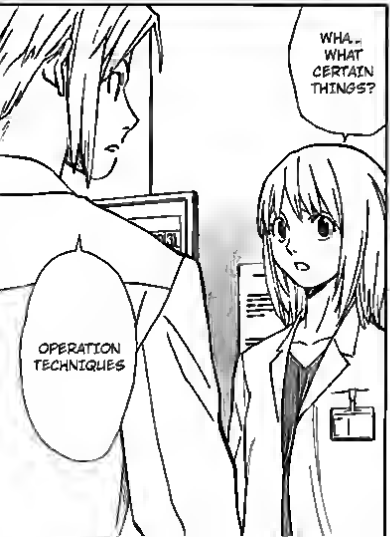

BY 'THAT WOMAN'... YOU'RE REFERRING TO...
HE MUST HAVE SOME MOTIVE FOR BRINGING THAT WOMAN IN.

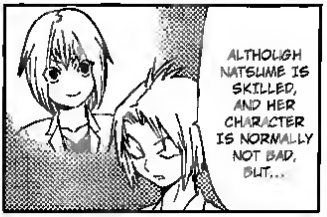
AS, I SUSPECTED, ANIKI HASN'T CHANGED ONE BIT.

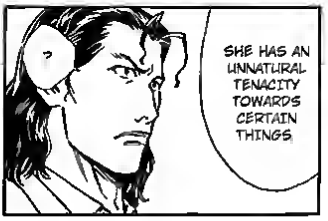

NO, NOT REALLY.
WHAT'S UP WITH YOU? ARE YOU ON BAD TERMS WITH YOUR SISTER?

NO, THERE'S A BIG PROBLEM.
IN THAT CASE, SHOULDN'T THERE BE NO PROBLEMS?

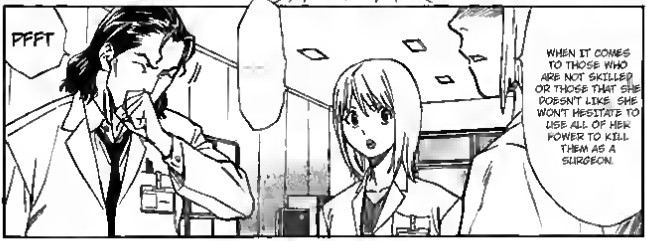
HUH?
NATSUME IS DIFFERENT FROM HER OLDER BROTHER SHE ISN'T CONCERNED WITH POLITICS..... SHE GETS ALONG WELL WITH HER OLDER BROTHER. BUT SHE ALSO GETS ALONG WELL WITH ME.


WHA... WHAT CERTAIN THINGS?
OPERATION TECHNIQUES

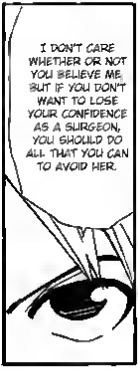

ALTHOUGH NATSUME IS SKILLED, AND HER CHARACTER IS NORMALLY NOT BAD, BUT...

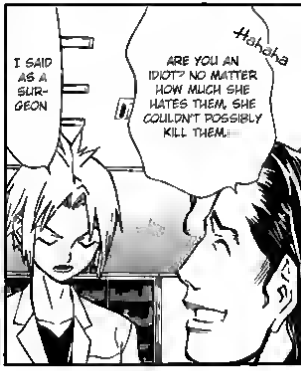

SHE HAS AN UNNATURAL TENACITY TOWARDS CERTAIN THINGS.

IF ANIKI IS LIKE IEYASU OR HIDEYOSHI, THE KIND OF PERSON WHO WOULD ATTAIN HIS GOAL THROUGH TRICKERY, THEN NATSUME IS LIKE NOBUNAGA


PFFT
WHEN IT COMES TO THOSE WHO ARE NOT SKILLED OR THOSE THAT SHE DOESN'T LIKE, SHE WON'T HESITATE TO USE ALL OF HER POWER TO KILL THEM AS A SURGEON.

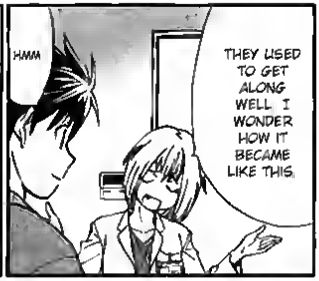
THAT'S MY ADVICE
GOKUN


I DON'T CARE WHETHER OR NOT YOU BELIEVE ME, BUT IF YOU DON'T WANT TO LOSE YOUR CONFIDENCE AS A SURGEON, YOU SHOULD DO ALL THAT YOU CAN TO AVOID HER.


I SAID AS A SUR-GEON
ARE YOU AN IDIOT? NO MATTER HOW MUCH SHE HATES THEM, SHE COULDN'T POSSIBLY KILL THEM.
Hahaha

AHAHAHA
SO YOU'RE THAT DANGEROUS SISTER
THAT'S RIGHT!
5
I AM SAIJOU-SENSEI'S REPLACEMENT, YET THEY DIDN'T TELL SAIJOU-SENSEI AT ALL!
hahaha
REALLY, AA-KUN AND SA-KUN ARE BOTH SO MEAN!
W-WELL, THEY ARE BOTH BUSY PEOPLE
YOU DON'T HAVE TO COVER FOR THEM
IN ANY CASE THOSE TWO ARE STILL ARE STILL ON BAD TERMS AREN'T THEY
.....

CAN'T THEY MAKE UP?
NO, NO, THAT'S IMPOSSIBLE.
SO THOSE TWO USED TO BE ON GOOD TERMS...


HMM
THEY USED TO GET ALONG WELL I WONDER HOW IT BECAME LIKE THIS.

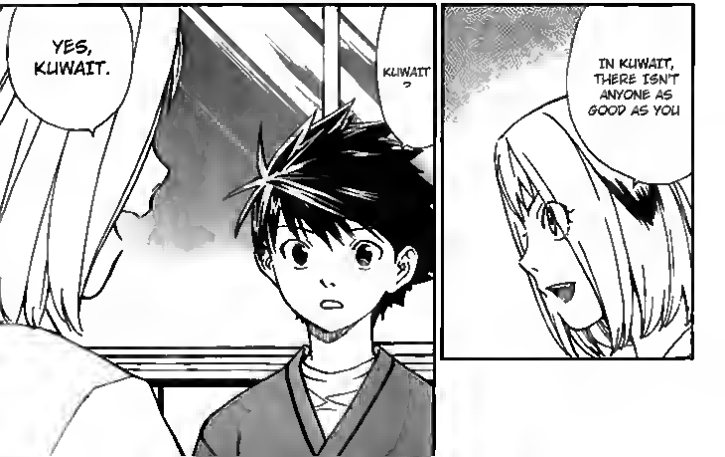
CONFLICTS BETWEEN BROTHERS ARE MORE COMPLEX THAN THOSE BETWEEN STRANGERS HONESTLY I HAVE NO INTEREST IN RESOLVING IT

...TO DEATH.

OHH
THE ONLY THINGS I'M INTERESTED IN ARE TECHNIQUES TO CUT PEOPLE UP.
YUP.

YES, I LOVE THEM!
NATSUME-SAN LIKES OPERA-TIONS

HAHAHA, I GOT YOU! IT'S A JOKE, JUST A JOKE.
WHEN I SEE INCOMPETENT BASTARDS, I FEEL SO SICK THAT I WANT TO KILL THEM
WOOOW
HE'S GOOD!
I GOT VERY EXCITED AFTER I SAW THE VIDEOS THAT SA-KUN SHOWED ME.
BUT SAIJOU-SENSEI IS SKILLFUL...

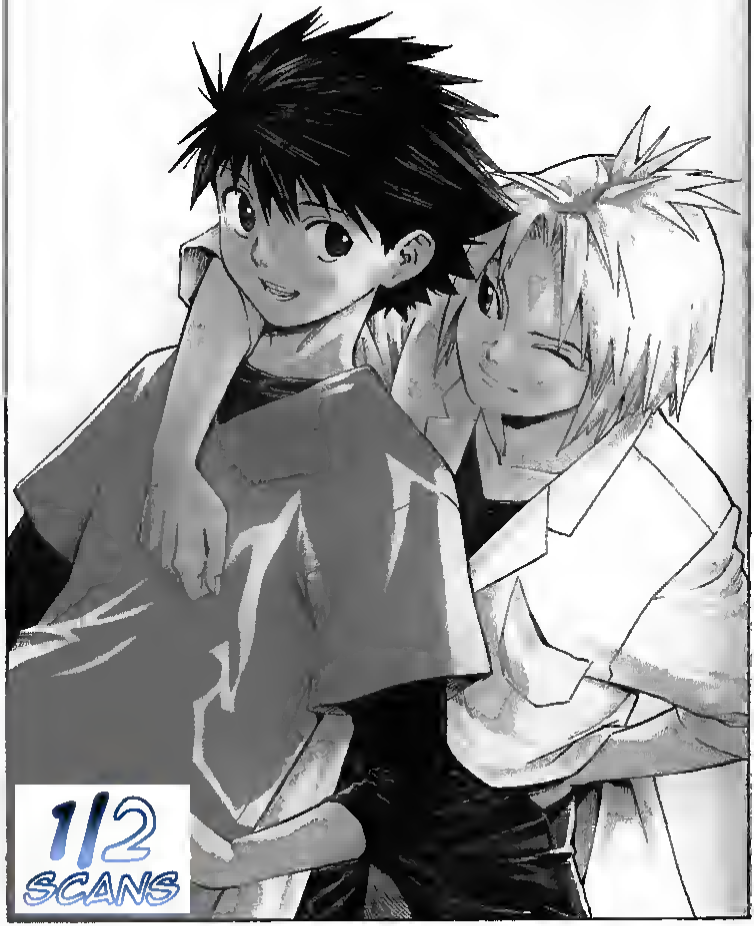

YES, KUWAIT.
KUWAIT ?
IN KUWAIT, THERE ISN'T ANYONE AS GOOD AS YOU

IN MIDDLE EASTERN COUNTRY LIKE THAT, YOU CAN CUT UP EVERYONE FROM CHILDREN TO ADULTS AS LONG AS YOU HAVE THE ABILITY, SO IT IS POPULAR AMONG JAPANESE SURGEON CANDIDATES
I GOT MY MEDICAL LICENSE IN JAPAN, BUT WENT OVERSEAS TO STUDY RIGHT AFTER THAT
KIND OF
BUT TO PEOPLE LIKE SAIJOU-SENSEI AND AA-KUN WHO GOT THEIR MEDICAL LICENSE OVERSEAS, I GUESS IT DOESN'T MATTER TO YOU
EH?
HE ALSO GOT EXPERIENCE OVERSEAS, BUT HE DIDN'T IMPROVE ONE BIT
BUT IN CONTRAST, AA-KUN,
IN AMERICA AS WELL, EVEN YOUNG DOCTORS GET SO MANY CHANCES TO OPERATE THAT THEY QUICKLY LEARN A LOT
THAT'S TRUE
HOW'S MY NICK?

T/N: The exact term used was "Kire ga nai" literally means not sharp. Not sure if Natsume's obsession with cutting ppl up causes her to use
I SAW THE VIDEO WHERE HE FIRST ASSISTED SAIJOU-SENSEI AA-KUN DIDN'T LOOK SO SHARP.
I WONDER...
AYAME IS BETTER THAN ME
HIS SPEED WASN'T GOOD EITHER. IT SEEMED LIKE HE WAS MOVING IN SLOW MOTION
FU FU FU
AA-KUN EITHER HAS NO TALENT OR HE'S NOT WORKING HARD ENOUGH.
YOU'LL UNDER-STAND IF YOU TRY IT...
WHAT DO YOU MEAN?
KACHIN
IF NATSUME-SAN THINKS THAT WAY THAT MEANS THAT NATSUME-SAN STILL HAS A LOT TO LEARN

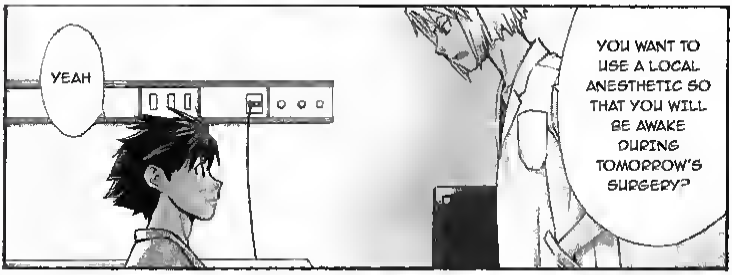
CHAPTER 36

ULTIMATE CONDITION



1/2 SCANS

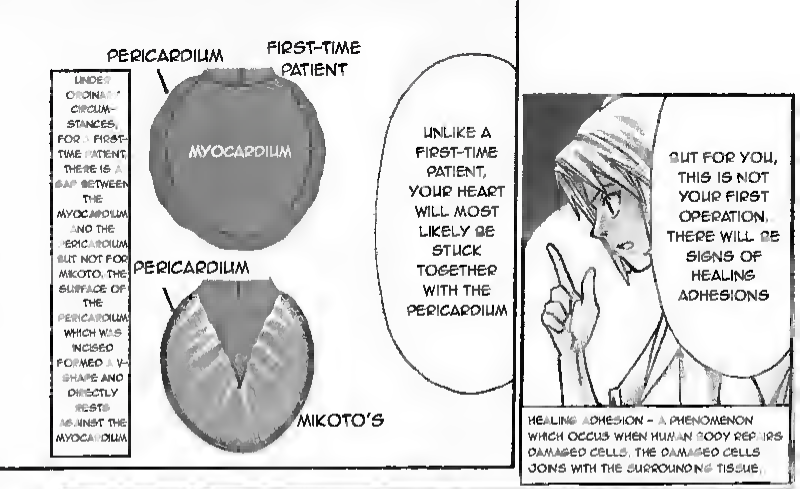
I HEARD FROM MIYABI
I'VE HAD ENOUGH OF YOU ALREADY. WHAT GOES ON INSIDE YOUR HEAD?


YEAH
YOU WANT TO USE A LOCAL ANESTHETIC SO THAT YOU WILL BE AWAKE DURING TOMORROW'S SURGERY?

2

ALTHOUGH IT IS TRUE THAT THE OPERATION DOES NOT REQUIRE THE PATIENT TO BE UNDER GENERAL ANESTHESIA TO PROCEED

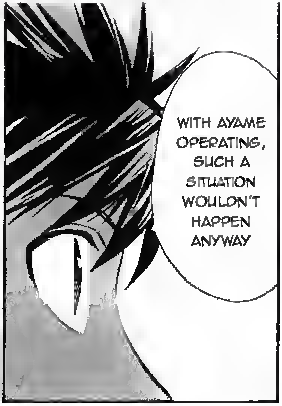
HMM
DURING THE SURGERY, THERE IS SOMETHING I WANT NATSUME TO KNOW
SOMETHING YOU WANT HER TO KNOW HUH

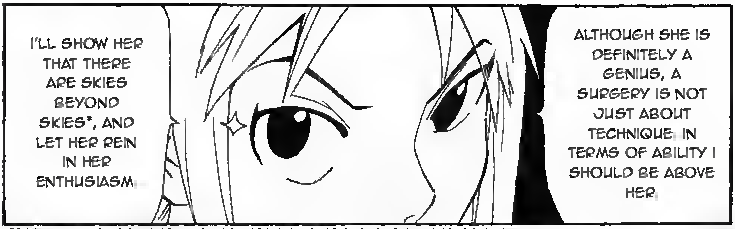

PERICARDIUM
FIRST-TIME PATIENT
MYOCARDIUM
PERICARDIUM
MIKOTO'S
UNDER ORDINARY CIRCUMSTANCES, FOR A FIRST-TIME PATIENT, THERE IS A GAP BETWEEN THE MYOCARDIUM AND THE PERICARDIUM BUT NOT FOR MIKOTO. THE SURFACE OF THE PERICARDIUM WHICH WAS INCISED FORMED A V-SHAPE AND DIRECTLY RESTS AGAINST THE MYOCARDIUM
UNLIKE A FIRST-TIME PATIENT, YOUR HEART WILL MOST LIKELY BE STUCK TOGETHER WITH THE PERICARDIUM
BUT FOR YOU, THIS IS NOT YOUR FIRST OPERATION. THERE WILL BE SIGNS OF HEALING ADHESIONS
HEALING ADHESION – A PHENOMENON WHICH OCCUS WHEN HUMAN BODY REPAIRS DAMAGED CELLS. THE DAMAGED CELLS JOINS WITH THE SURROUNDING TISSUE.

THERE IS A GAP BETWEEN THE HEART AND THE CHEST CAVITY
MIKOTO
THE HEART IS VERY CLOSE TO THE STERNAL AREA
YOUR HEART IS LIKELY PRESSING AGAINST THE INSIDE OF YOUR CHEST

THEN YOU NEED TO IMMEDIATELY INJECT ME WITH PROPOFOL AND LET ME SLEEP

AH AH
WHILE CONDUCTING THE PEELING DURING THE SURGERY A TINY MISTAKE WILL RESULT IN MASSIVE BLEEDING




I'LL SHOW HER THAT THERE ARE SKIES BEYOND SKIES*, AND LET HER REIN IN HER ENTHUSIASM
ALTHOUGH SHE IS DEFINITELY A GENIUS, A SURGERY IS NOT JUST ABOUT TECHNIQUE. IN TERMS OF ABILITY I SHOULD BE ABOVE HER.

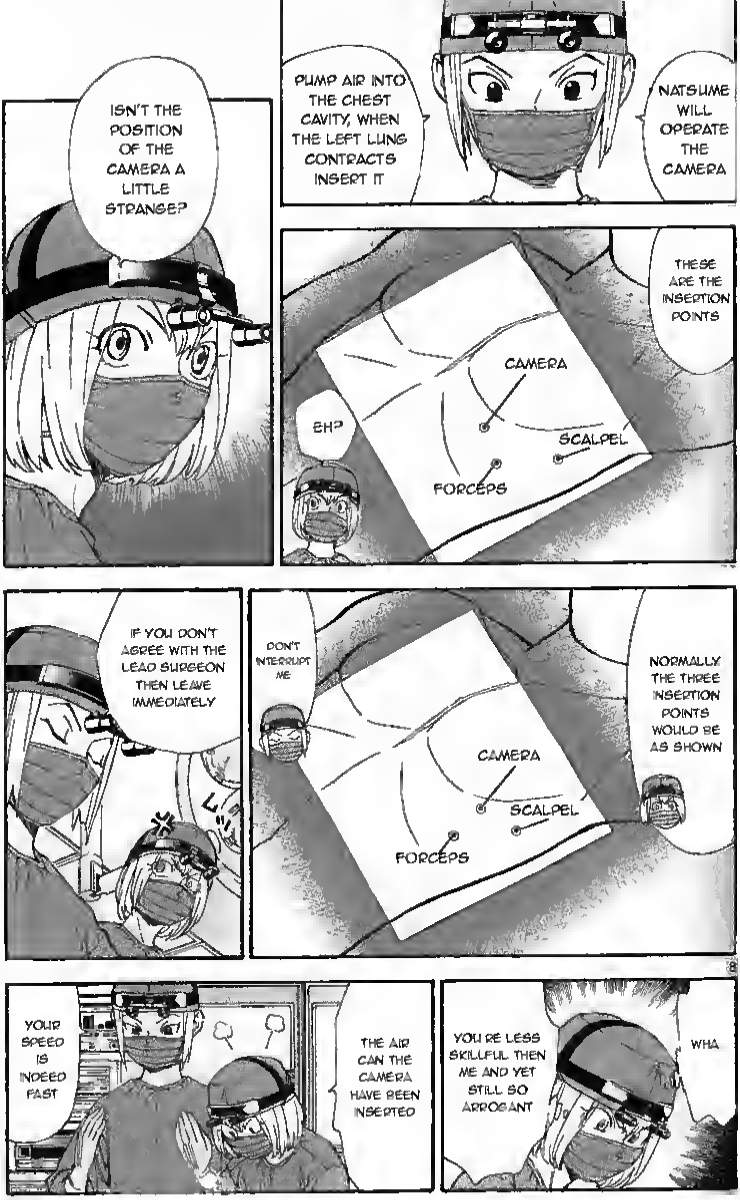
*T/N 天外有天 SKIES BEYOND SKIES, MEANING THAT THERE IS ALWAYS SOMEONE BETTER

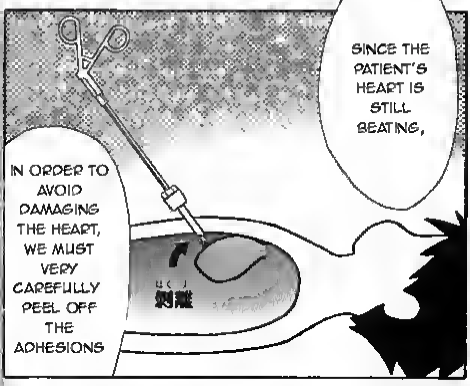
THAT'S TRUE
TELL ME WHAT IT IS WHEN THE TIME COMES, IT MAY END UP WITH ME HAVING TO BE THE ONE TO TELL HER
THOUGH I SAY THIS, I REALLY WANT TO KNOW

IF I REALLY HAVE TO EXPLAIN IT
IT'S KINDA HARD TO EXPLAIN IT OFF THE BAT
I THINK IT CAN BE EXPLAINED AS THE ULTIMATE CONDITION OF A DOCTOR
5
ULTIMATE CONDITION!?
ON THE DAY OF THE SURGERY

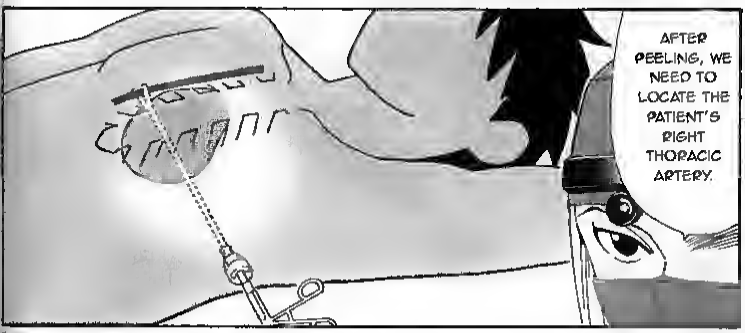
MIYABI, STATUS OF THE ANESTHESIA?
GOOD, CONDITION IS STABLE
OK
YOU CAN BEGIN WHEN-EVER
MIKOTO, YOU ALRIGHT?
YUP, I'M FINE
THE PATIENT IS SAIJO MIKOTO
... THEN I WILL GO THROUGH THE OPERATION BRIEF

THE LEFT CORONARY ARTERY DIVERGES INTO TWO VEINS
THE AREA NEAR THE LEFT CORONARY ARTERY SHOWS SOME BLOCKAGE RESULTING IN A MYOCARDIAL INFARCTION
SOMETHING TO LET ME KNOW?
?
ALSO, BECAUSE MIKOTO HAS SOMETHING TO LET NATSUME KNOW DURING THE SURGERY, WE WILL BE USING EPIDURAL ANESTHESIA
FROM THE FRONT AND BACK POSITIONS WE WILL CONDUCT A CORONARY BYPASS
INTERNAL THORACIC ARTERIES
DOTTED LINES FOR POSITION AFTER BYPASS
7
SO, FROM THE PATIENTS LEFT CHEST AREA WE WILL BE INSERTING THE SURGICAL TOOLS IN 3 POSITIONS
SURGICAL CAMERA
FORCEPS
SCALPEL

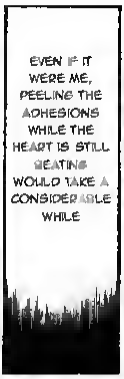

ISN'T THE POSITION OF THE CAMERA A LITTLE STRANGE?
PUMP AIR INTO THE CHEST CAVITY, WHEN THE LEFT LUNG CONTRACTS INSERT IT
NATSUME WILL OPERATE THE CAMERA
THESE ARE THE INSERTION POINTS
CAMERA
EH?
SCALPEL
FORCEPS
IF YOU DON'T AGREE WITH THE LEAD SURGEON THEN LEAVE IMMEDIATELY
DON'T INTERRUPT ME
NORMALLY THE THREE INSERTION POINTS WOULD BE AS SHOWN
CAMERA
SCALPEL
FORCEPS
YOUR SPEED IS INDEED FAST
THE AIR CAN THE CAMERA HAVE BEEN INSERTED
YOU'RE LESS SKILLFUL THEN ME AND YET STILL SO ARROGANT
WHA


SINCE THE PATIENT'S HEART IS STILL BEATING,
IN ORDER TO AVOID DAMAGING THE HEART, WE MUST VERY CAREFULLY PEEL OFF THE ADHESIONS

THE LEFT LUNG CONTRACTION IS SUFFICIENT, WE WILL PROCEED TO OPERATE ON THE HEART


AFTER PEELING, WE NEED TO LOCATE THE PATIENT'S RIGHT THORACIC ARTERY.

PEELING COMPLETED
SINCE YOU ARE SO COCKY, IF YOU TAKE TOO LONG I'M GOING TO SCOLD YOU UNTIL YOU NEVER WANT TO OPERATE AGAIN

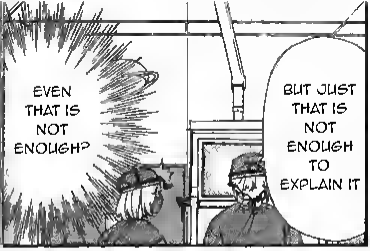

EVEN IF IT WERE ME, PEELING THE ADHESIONS WHILE THE HEART IS STILL BEATING WOULD TAKE A CONSIDERABLE WHILE

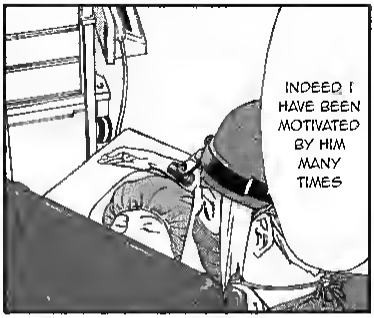
HAH, WATCH OUT MY HATEFUL BROTHER

!!
MOVING ON TO THE PEELING OF THE RIGHT CHEST CAVITY
WAH, WAIT A MINUTE SA-NII
YOU ARE ALREADY DONE WITH THE HEART PEELING?
OF COURSE
WEREN'T YOU WATCHING WHILE I WAS DEMONSTRATING?
I CAN'T BELIEVE THIS!
I WATCHED THE VIDEO OF AYA-NII'S OPERATION, YOU WEREN'T THAT FAST...
THAT MUST HAVE BEEN A VIDEO OF ME AS THE OPERATING ASSITANT
BECAUSE MIKOTO-SENSEI'S SURGERIES ARE ALWAYS CUTTING-EDGE OPERATING METHODS
BEING HIS OPERATING ASSISTANT IS DIFFICULT
.....!
OH, THAT'S RIGHT...

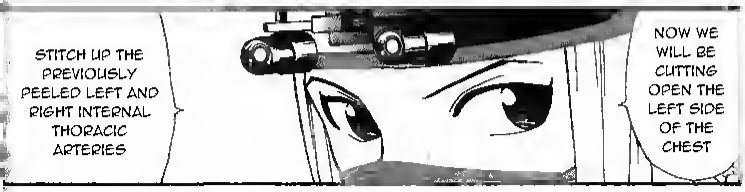
NEW CUTTING-EDGE METHODS MEAN THAT NO ONE HAS TRIED IT BEFORE... OF COURSE THE SPEED OF THE ASSISTANTS WOULD NOT BE ABLE TO BE AS FAST
THAT'S RIGHT, COME TO THINK OF IT, MIKOTO-SENSEI ALSO SAID THAT AYA-NII WAS MORE SKILLED THAT HIMSELF.
AYAME IS BETTER THAN ME
IS THAT RIGHT?
TOO COOL AYA-NII! LOOKS LIKE YOU COULD BE EVEN BETTER THAN MIKOTO.
AH, SO IT'S STILL JUST SURGICAL SKILL THAT MATTERS IN YOUR HEAD.
MY SURGICAL SPEED MAY BE ON PAR WITH MIKOTO OR PERHAPS SLIGHTLY FASTER...
BUT THERE WOULD BE NO COMPARISON IF ASKED WHO WAS THE BETTER SURGEON
!?
NO WONDER YOU DON'T GET IT

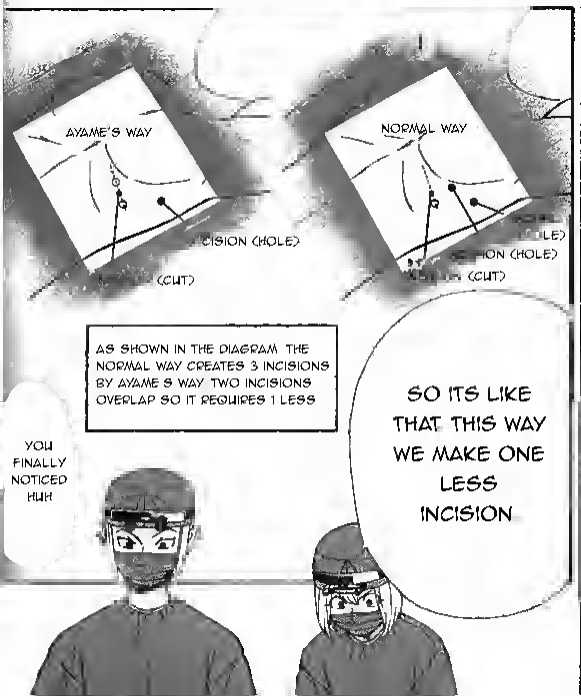
PEELING OF THE RIGHT THORACIC ARTERY COMPLETED
NOT... NOT WHAT YOU MEANT?
OF COURSE THAT IS PART OF IT BUT NOT REALLY WHAT I MEANT
DO YOU MEAN THAT MIKOTO-SENSEI IS BETTER BECAUSE HE PIONEERS NEW SURGICAL METHODS?
NEXT UP, WE WILL BE .. THE PEELING OF THE LEFT THORACIC ARTERY
REALLY... HE'S REALLY FAST!
GET WHAT?
I GET IT AYA-NII
I NEVER THOUGHT THAT AYA-NII WOULD BE THIS QUICK
HA!
COMPETITION BETWEEN RIVALS HELP SHARPEN EACH OTHER AND RAISES THEIR SKILL LEVEL
MIKOTO-SENSEI IS AMAZING IN BEING ABLE TO LEAD AYA-NII INTO THIS REALM OF SKILL


EVEN THAT IS NOT ENOUGH?
BUT JUST THAT IS NOT ENOUGH TO EXPLAIN IT


INDEED I HAVE BEEN MOTIVATED BY HIM MANY TIMES

ALRIGHT THE THORACIC AREA HAS BEEN DEALT WITH


STITCH UP THE PREVIOUSLY PEELED LEFT AND RIGHT INTERNAL THORACIC ARTERIES
NOW WE WILL BE CUTTING OPEN THE LEFT SIDE OF THE CHEST


AYAME'S WAY
(CUT)
NORMAL WAY
AS SHOWN IN THE DIAGRAM THE NORMAL WAY CREATES 3 INCISIONS BY AYAME'S WAY TWO INCISIONS OVERLAP SO IT REQUIRES 1 LESS
SO ITS LIKE THAT THIS WAY WE MAKE ONE LESS INCISION
YOU FINALLY NOTICED HUH

NOW TO CUT A LINE ACROSS THE INCISION HOLES PREVIOUSLY USED TO INSERT THE FORCEPS AND CAMERA.
AH!

!
THIS WAY OF THINKING SHOWS OUR CONCERN FOR THE PATIENT
SO THIS IS THE TRUE ANSWER, ISNT IT!
ALTHOUGH I WAS THE ONE WHO THOUGHT OF THIS METHOD, MIKOTO WOULD ALSO THINK OF A SIMILAR METHOD AS WELL
LEFT THORACIC INCISION
PEELING THE PERICARDIUM
WHAT A SHAME
THE CONCERN FOR THE PATIENT DURING THE OPERATION IS IMPORTANT. A DOCTOR WITH THIS MINDSET...
STILL ISN'T ENOUGH?
BUT THIS ISNT THE TRUE ANSWER EITHER

SIDE TO SIDE SUTURE
AS SHOWN THE S DE OF THE ARTERY S CONNECTED TO THE S DE
TERMINAL SUTURE
AS SHOWN THE END OF THE ARTERY S CONNECTED TO THE S DE
LOOK AGAIN BEFORE YOU COMMENT
SHOULDN'T CONNECTING ARTERIES OF SIMILAR THICKNESS BE DONE USING TERMINAL SUTURING?
SIDE SUTURE?
NEXT WE WILL USE A SIDE TO SIDE SUTURING METHOD TO JOIN THE INTERNAL THORACIC ARTERY TO THE CORONARY ARTERY
BUT THERE ARE ALSO CASES WHERE THE THICKNESS IS NOT THE SAME
INDEED GENERALLY THESE TWO ARTERIES ARE OF SIMLAR THICKNESS...
YOU'RE NOT OBSERVANT ENOUGH, NATSUME
5
YEAH, RIGHT
CORONARY ARTERY 1.3mm
INTERNAL THORACIC ARTERY THICKNESS 3.5MM
THE CORONARY ARTERY IS ONLY 1.3MM WHEREAS THE INTERNAL THORACIC ARTERY IS 3.5MM!
NORMALLY THE CORONARY ARTERY IS 2 ~ 3 MM, AND THE INTERNAL THORACIC ARTERY IS ABOUT 3 MM. THEIR SIZES DO NOT DIFFER MY MUCH
LOOK CLOSELY, MIKOTO'S CORONARY ARTERY IS SLIGHTLY THINNER HIS INTERNAL THORACIC ARTERY
THAT'S TRUE

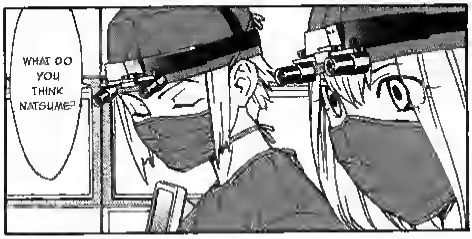
SIDE SUTURE
TERMINAL SUTURE
MEDICAL STUDIES HAVE ALREADY DETERMINED THAT WHEN THE THICKNESS OF THE ARTERIES DIFFER GREATLY, THE MORE FLEXIBLE SIDE SUTURING ENABLES SMOOTHER BLOOD FLOW
BECAUSE SIDE SUTURING USES THE SIDE OF THE ARTERY, THE SIZE OF THE OPENING CAN BE ADJUSTED. THERE IS NO PROBLEM EVEN IF THE ARTERIES ARE OF DIFFERENT THICKNESS
BECAUSE TERMINAL SUTURING USES THE END OF THE ARTERY TO CONNECT, THE SIZE OF THE OPENING CANNOT BE ADJUSTED. IF THE THICKNESS DIFFERS TOO MUCH, THE BLOOD FLOW WILL NOT BE SMOOTH
.....
THAT'S, THAT'S RIGHT!
INSTEAD OF TAKING THINGS AS THEY GO, SUCH FINE DETAILS ARE ALSO OBSERVED. THIS IS ANOTHER OF HIS STRONG POINTS
ACTUALLY, THIS DIFFERENCE IS THICKNESS WAS NOT DISCOVERED BY ME. IT WAS MIKOTO WHO REALISED IT DURING AN ANGIOGRAPHY BEFORE THE SURGERY... ...
I... FINALLY GET IT AYA-NII!
MIKOTO-SENSEI'S SUPERIOR OBSERVATIONAL SKILLS IS REASON WHY HE'S SO IMPRESSIVE
... SIGH
THIS TIME IT'S REALLY IT, RIGHT?

SUTURING OF THE LEFT AND RIGHT INTERNAL THORACIC ARTERIES COMPLETE. PROCEEDING WITH STITCHING UP THE CHEST INCISION
ID-IDIOT?
ARE YOU AN IDIOT?
LISTEN CAREFULLY, THE ANSWER IS...
WAIT... WAIT A MINUTE, THEN THE ANSWER IS...
EVEN WITH ALL THESE, IT IS STILL A WAY OFF FROM THE ULTIMATE CONDITION OF A DOCTOR
ALL...?
ALL OF THE ABOVE!

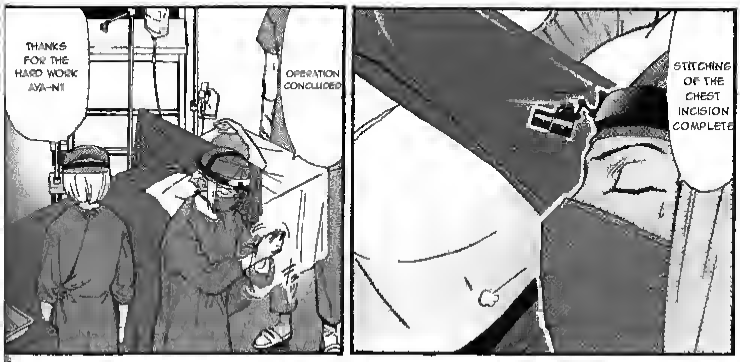
BEING ABLE TO THINK LIKE THAT IS WHERE MIKOTO IS SO IMPRESSIVE
.....!!

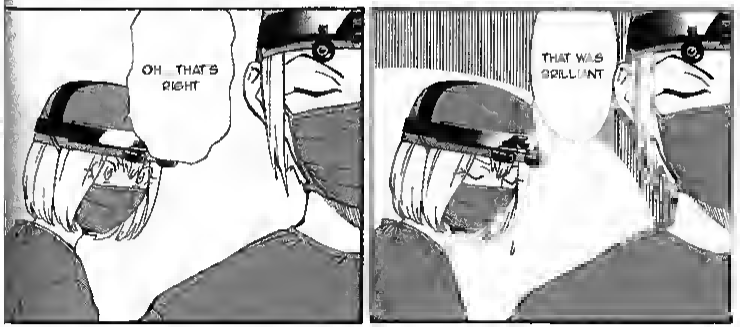
NONETHELESS, HE STILL CONSIDERS HIMSELF A LONG WAY OFF FROM THE ULTIMATE CONDITION OF A DOCTOR...

WITH THE SAME SURGICAL SKILL AS AYA-NII, IDEAS AND EMPATHY THAT SURPASSES AYA-NII, BRINGING POSITIVE IMPACT ON HIS PEERS, IMPECCABLE DEGREE OF OBSERVATION AND ATTENTION TO DETAIL.


WHAT DO YOU THINK NATSUME?

HMMPH!
NOW YOU KNOW, NO MATTER HOW HARD YOU TRY, YOU WILL JUST HAVE A SMALL ROLE TO PLAY
INDEED, I MAY NOT HAVE TRIED HARD ENOUGH
AT LEAST YOU KNOW


THANKS FOR THE HARD WORK AYA-N!
OPERATION CONCLUDED
STITCHING OF THE CHEST INCISION COMPLETE

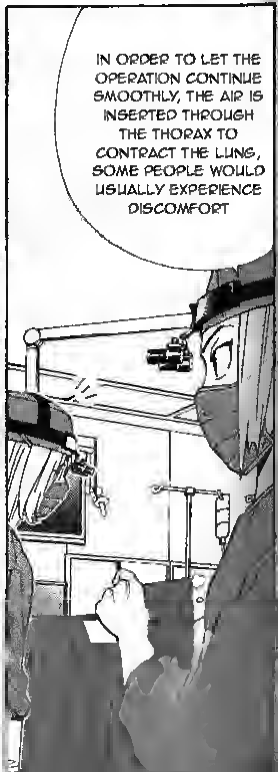

OH... THAT'S RIGHT
THAT WAS BRILLIANT

AH!
BUT IT SEEMS LIKE HE DIDNT SAY ANYTHING

THIS IS ALSO WHERE YOUR OBSERVATION IS LACKING NATSUME

DIDN'T YOU SAY THAT MIKOTO-SENSEI HAD SOMETHING TO SAY TO ME DURING THE SURGERY?

MIKOTO-SENSEI COULDN'T HAVE BEEN ABLE TO SPEAK FROM THE START


IN ORDER TO LET THE OPERATION CONTINUE SMOOTHLY, THE AIR IS INSERTED THROUGH THE THORAX TO CONTRACT THE LUNG, SOME PEOPLE WOULD USUALLY EXPERIENCE DISCOMFORT

AYAME YOU'RE REALLY TOO MUCH!
COULDN'T SPEAK AT ALL
THE NEXT DAY
I JUST WANTED TO TELL HER... AS A GENERAL CONSENSUS [DURING AN OPERATION, THERE ARE LIMITLESS POSSIBLE POINTS TO NOTE. JUST RELYING ON SURGICAL TECHNIQUE IS NOT ENOUGH TO COVER THEM ALL. CONTINUALLY STRIVING FOR THE ULTIMATE CONDITION IS REALLY WHAT'S MOST IMPORTANT]...
BUT WHAT DOES IT MATTER ANYWAY
AFTER YOUR RANDOM STIR, IT SEEMS LIKE I WAS TRYING TO BRAG ABOUT MYSELF...
I DIDN'T LIE TO HER NOR STRAY FROM THE POINT YOU WANTED TO MAKE
SORRY

ALSO, NOW THAT SHE KNOWS HOW AWESOME YOU ARE, THAT WEIRDO HAS TO BE A BIT MORE HUMBLE
THERE REALLY ARE SKIES AFTER SKIES
AFTER ALL, I HAD SOME THINGS I WANTED TO TELL HER AS WELL
IT'S THE GREAT MIKOTO-SENSEI! AFTER ALL, YOU REALLY ARE THE SAIJOU NO MEI!
HA HA HA
ANOTHER PERSON UNDER YOUR INFLUENCE HAS BECOME A OUTSTANDING DOCTOR
... THOUGH I DON'T AGREE, I'M JUST NOT GOING TO BOTHER
THE TREE DIAGRAM THAT USES YOU AS THE VERTEX IS GRADUALLY EXPANDING
HAIZ

T/N: I GUESS THE TREE DIAGRAM METAPHOR KIND OF MEANS SOMETHING LIKE MIKOTO'S SPHERE OF INFLUENCE

BUT,
WHEN DID YOU BECOME STUPID?
LOOKS LIKE THERE'S BEEN A POSITIVE INFLUENCE ON A GENIUS LIKE NATSUME. ALSO...
OI, OI, OI
DID YOU REALLY NOT EXPECT THIS TO HAPPEN?
MIKOTO ISN'T THAT STUPID. IF HE REALLY WANTED TO SAY SOMETHING, HE COULD ACTUALLY HAVE WAITED TILL AFTER THE SURGERY WHEN WATCHING THE POST-OP VIDEO.
HA. REALLY A WEIRDO
BUT NOW THAT I THINK ABOUT IT, THIS IS REALLY STRANGE
AIYA... I ONLY WORRIED ABOUT WHETHER I WAS DOING TO BE FINE.
FROM WHAT I CAN GATHER, MIKOTO'S MUST HAVE HAD HIS OWN REASONS FOR WHY HE HAD TO BE AWAKE DURING THE SURGERY
ONLY SOMEONE NEARING THE ULTIMATE FORM OF A DOCTOR WOULD UNDERSTAND
A VERY SPECIAL REASON
1/2 SCANS

HI EVERYONE! THIS CHAPTER IS BROUGHT TO YOU BY:

1|2 SCANS

CLEANER: HOXYHO
TRANSLATOR: 1|2PRINCE
TYPESETTER: HOXYHO

Aren't you glad we're finally over that cliffhanger?

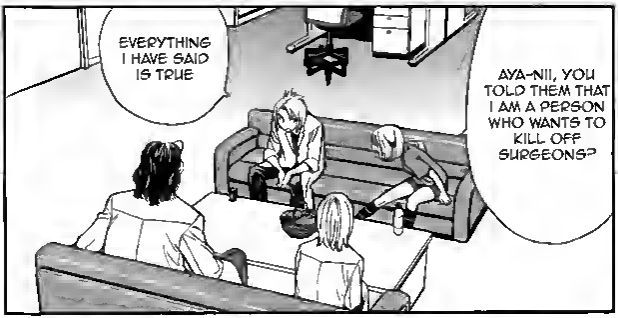
1|2 Scans is looking for better quality raws and cleaners.

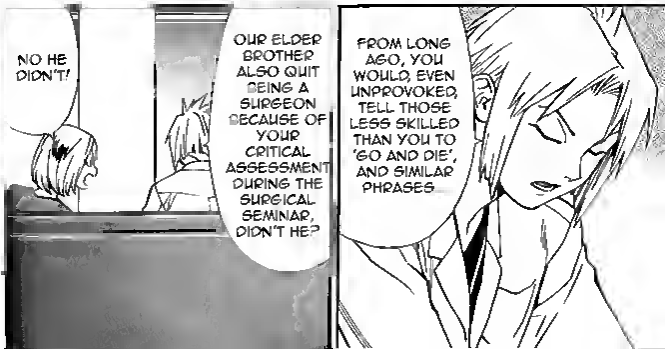
If you wanna help out or just have some questions, shoot us an email at 1|2@email.com

1|2 Scans hopes to completely scanlate Saijou no Meii and its sequel Saijou no Meii - The King of Neet.

CHAPTER 37

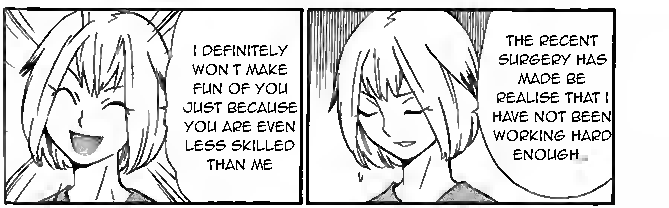
EH...
AYA-NII, YOU'RE TOO MUCH!

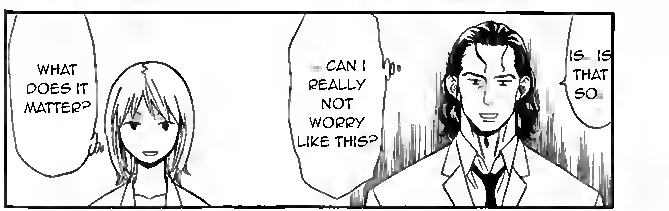

EVERYTHING I HAVE SAID IS TRUE
AYA-NII, YOU TOLD THEM THAT I AM A PERSON WHO WANTS TO KILL OFF SURGEONS?

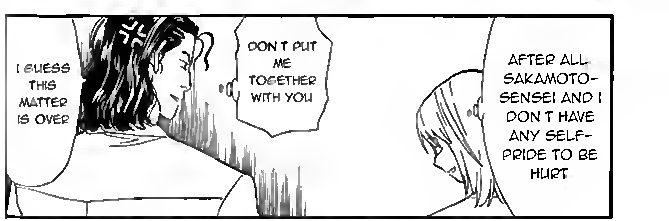

NO HE DIDN'T!
OUR ELDER BROTHER ALSO QUIT BEING A SURGEON BECAUSE OF YOUR CRITICAL ASSESSMENT DURING THE SURGICAL SEMINAR, DIDN'T HE?
FROM LONG AGO, YOU WOULD, EVEN UNPROVOKED, TELL THOSE LESS SKILLED THAN YOU TO 'GO AND DIE', AND SIMILAR PHRASES

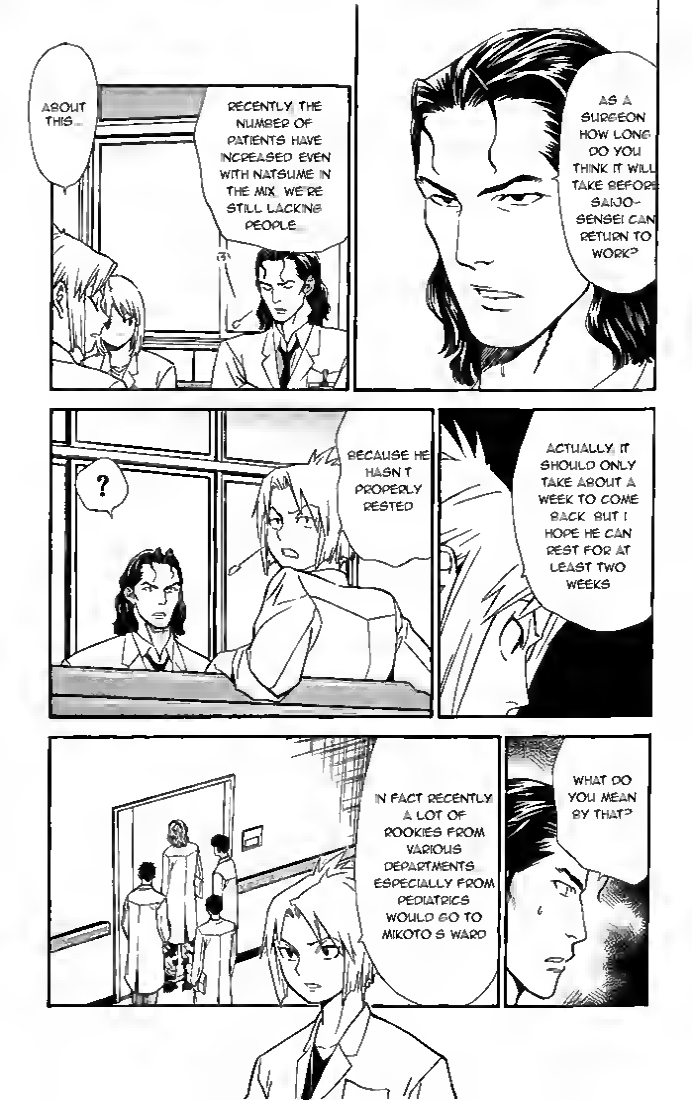
I DID SAY THAT 'SADAME-NII DOESN'T HAVE A SPECK OF TALENT"...
BUT I DIDN'T TELL HIM TO GO AND DIE
OI... NATSUME YOU...
EVEN IF HE DOESNT HAVE TALENT, HE IS A PERSON KNOWING THAT HE DOESNT HAVE ANY TALENT WILL MAKE HIM FEEL HURT
EVEN THOUGH THEY DON'T HAVE MUCH TALENT, BUT IF YOU ACTUALLY TELL THEM THIS THEY WILL ALSO FEEL HURT
FOR EXAMPLE THESE TWO
THAT'S WHY I PRE-EMPTIVELY TOLD THEM YOU ARE THIS KIND OF PERSON, SO THEY WILL FEEL LESS HURT
DO YOU UNDERSTAND?
SO IT'S LIKE THAT'
THAT'S MY ANI-NII

I'M SO SORRY I DON'T HAVE ANY TALENT
I DON'T MIND EITHER WAY
I DON'T HAVE ANY TALENT AFTER ALL
BUT YOU GUYS DON'T HAVE TO WORRY


THE RECENT SURGERY HAS MADE BE REALISE THAT I HAVE NOT BEEN WORKING HARD ENOUGH
I DEFINITELY WON'T MAKE FUN OF YOU JUST BECAUSE YOU ARE EVEN LESS SKILLED THAN ME


IS... IS THAT SO...
CAN I REALLY NOT WORRY LIKE THIS?
WHAT DOES IT MATTER?


AFTER ALL SAKAMOTO-SENSEI AND I DON'T HAVE ANY SELF-PRIDE TO BE HURT
DON'T PUT ME TOGETHER WITH YOU
I GUESS THIS MATTER IS OVER

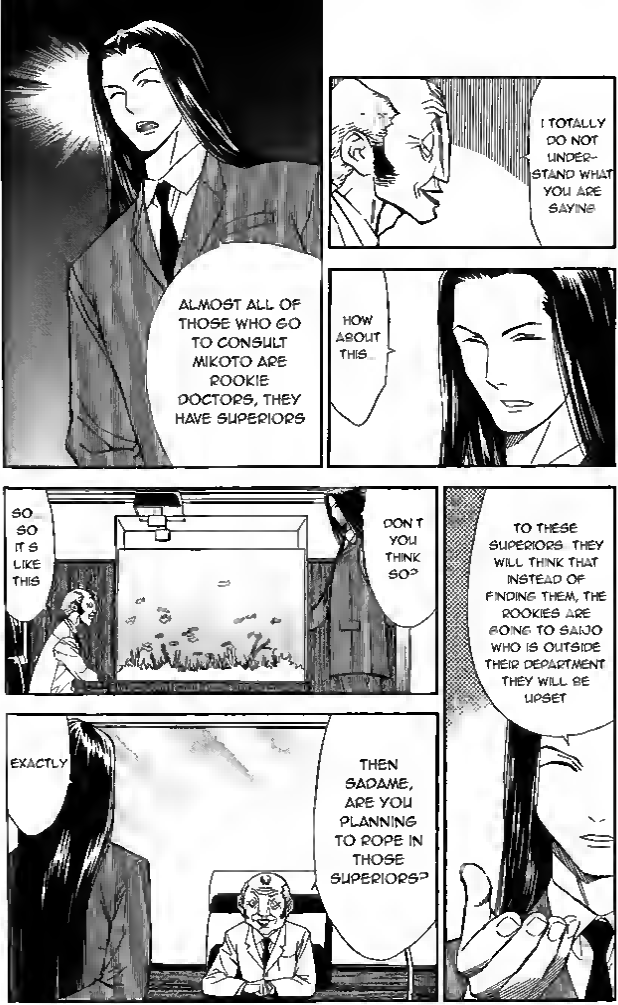

AS A SURGEON HOW LONG DO YOU THINK IT WILL TAKE BEFORE SAIJO-SENSEI CAN RETURN TO WORK?
RECENTLY THE NUMBER OF PATIENTS HAVE INCREASED EVEN WITH NATSUME IN THE MIX. WE'RE STILL LACKING PEOPLE.
ABOUT THIS...
ACTUALLY, IT SHOULD ONLY TAKE ABOUT A WEEK TO COME BACK. BUT I HOPE HE CAN REST FOR AT LEAST TWO WEEKS
BECAUSE HE HASN'T PROPERLY RESTED
?
WHAT DO YOU MEAN BY THAT?
IN FACT RECENTLY A LOT OF ROOKIES FROM VARIOUS DEPARTMENTS ESPECIALLY FROM PEDIATRICS WOULD GO TO MIKOTO'S WARD

LIKE, TAKE A LOOK AT THIS X-RAY, WHAT DO YOU THINK, WHAT ABOUT THIS CT SCAN, PERSISTENTLY ASKING QUESTIONS
I'VE ALREADY TRIED
SINCE YOU KNOW ABOUT WHY DON'T YOU STOP IT?
THE PROBLEM IS
HOW IS IT ANY DIFFERENT FROM THE JOB OF AN INTERNAL MEDICINE DOCTOR?
ALSO, WITH THE 'SAIJOU NO MEII' INCIDENT, INCREASING HIS POPULARITY IN THE HOSPITAL IS NOT A BAD THING RIGHT?
BUT MIKOTO'S PERSONALITY IS LIKE THAT, FURTHERMORE, IT'S BORING WITH NOTHING TO DO

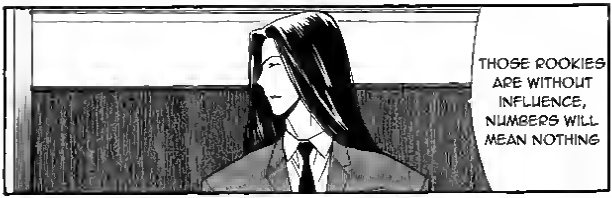
WELL DONE!
.....
I'VE HEARD THAT YOUR SISTER HAS NOW COMPLETELY BECOME ONE OF MIKOTO'S PEOPLE
I... I'VE ALREADY HEARD, SADAME!
NOW ALL THE GENIUSES ARE GATHERING UNDER SAIJO. DOESN'T THIS DEFEAT THE PURPOSE?
DIDN'T YOU SAY IF MANY GENIUSES APPEARED, SAIJO'S BRIGHTNESS WOULD BE OVERSHADOWED...
GENIUS

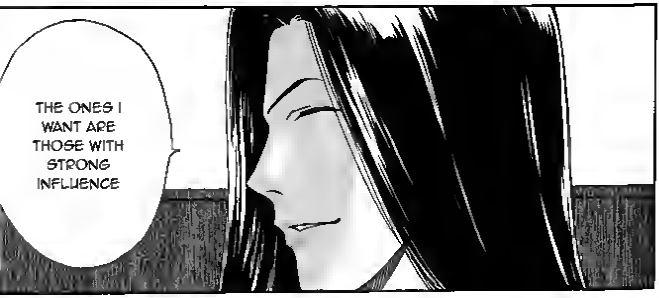
IF YOU ALLOW HIS POPULARITY TO CONTINUE TO RISE, YOU WON'T HAVE ANY CHANCE OF WINNINGS
I'VE ALSO HEARD THAT THE ROOKIES FROM VARIOUS DEPARTMENTS ARE ALSO RUNNING TO SAIJO'S WARD FOR CONSULTATION
.....
.....
ABOUT THIS
ARE YOU LISTENING TO ME?
I'M JUST JOKING
SADAME! ARE YOU FOOLING WITH ME NOW?
I'M SORRY. WHAT WERE YOU SAYING?
I WAS LISTENING TO ENKA

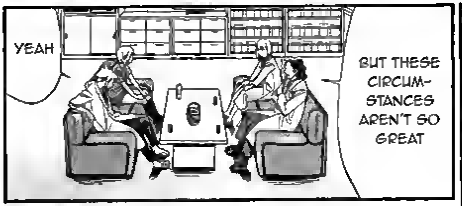
BUT THE CURRENT CIRCUM-STANCES WERE MOSTLY WITHIN MY CALCUL-ATIONS
WHAT DO YOU MEAN?
REST ASSURED
TRULY THAT EVEN NATSUME WOULD BE CHARMED BY SAIJO WAS OUT OF MY EXPECTATIONS
THIS MATTER TO SAIJO COULD BE SAID TO BE A FATAL WOUND
WHAT?
AS LONG AS MIKOTO WHO HAS JUST UNDERGONE AN OPERATION CONTINUES TO STAY IN THE WARD, IT'S OBVIOUS THAT THERE WILL BE PEOPLE WHO WANT TO CONSULT HIM
IT'S SIMPLE, UNTIL TODAY I HAVE BEEN TRYING TO SUPPRESS HIM, BUT EVERY DEPARTMENT HAS YOUNG DOCTORS THAT LOOK UP TO SAIJO, AND THEIR BNUMBERS ARE INCREASING

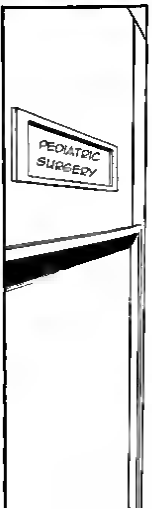

ALMOST ALL OF THOSE WHO GO TO CONSULT MIKOTO ARE ROOKIE DOCTORS, THEY HAVE SUPERIORS
I TOTALLY DO NOT UNDER-STAND WHAT YOU ARE SAYING
HOW ABOUT THIS...
SO... SO IT'S LIKE THIS
DON'T YOU THINK SO?
TO THESE SUPERIORS THEY WILL THINK THAT INSTEAD OF FINDING THEM, THE ROOKIES ARE GOING TO SAIJO WHO IS OUTSIDE THEIR DEPARTMENT THEY WILL BE UPSET
EXACTLY
THEN SADAME, ARE YOU PLANNING TO ROPE IN THOSE SUPERIORS?

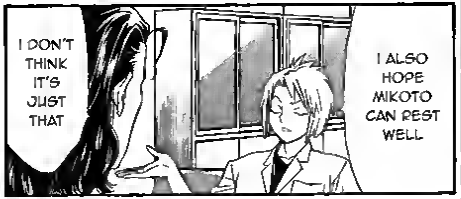
5


THOSE ROOKIES ARE WITHOUT INFLUENCE, NUMBERS WILL MEAN NOTHING


THE ONES I WANT ARE THOSE WITH STRONG INFLUENCE


YEAH
BUT THESE CIRCUM-STANCES AREN'T SO GREAT

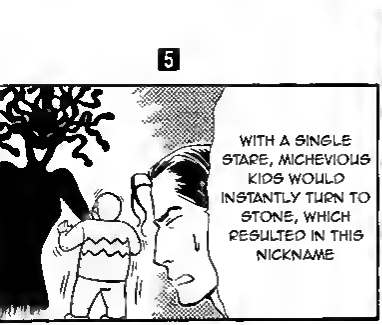

PEDIATRIC SURGERY

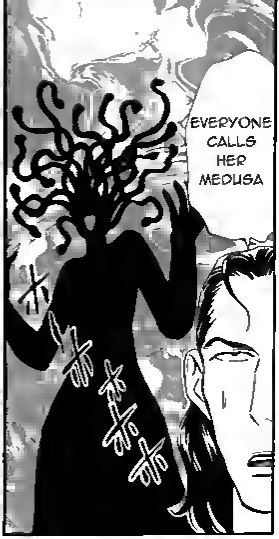

I DON'T THINK IT'S JUST THAT
I ALSO HOPE MIKOTO CAN REST WELL

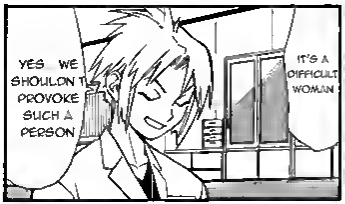
ER...
SUPE-RIORS?
DO YOU NOW WHAT KIND OF PEOPLE ARE THEIR SUPERIORS?
JUST NOW, YOU SAID ESPECIALLY THE PEDIATRIC DEPARTMENT WOULD GO TO CONSULT MIKOTO...
YES, HE MAY BE CONSIDERED A SUPERIOR, BUT HE IS ONLY THE VICE-DEPARTMENT HEAD
ISN'T IT ITOU-SENSEI?

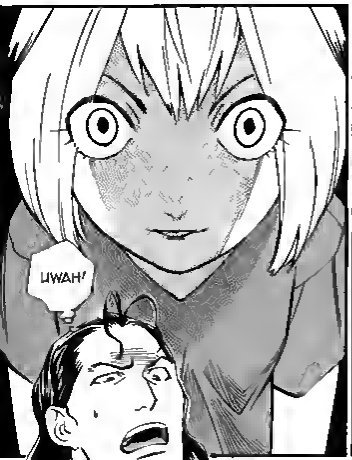
NORMALLY WITHOUT EXPRESSION, BUT ONCE ANGERED, SHE BECOMES VERY SCARY
THE PEDIATRICS DEPARTMENT HEAD IS A RUTHLESS CHARACTER NAMED SANO MEGUMI

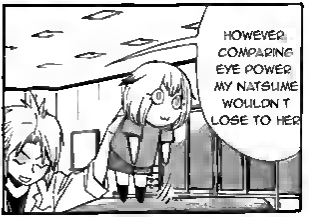
5

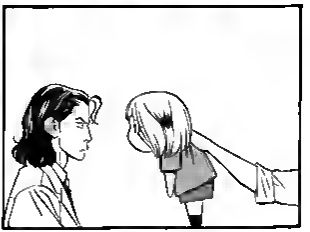

WITH A SINGLE STARE, MICHEVIOUS KIDS WOULD INSTANTLY TURN TO STONE, WHICH RESULTED IN THIS NICKNAME


EVERYONE CALLS HER MEDUSA
ホホホ

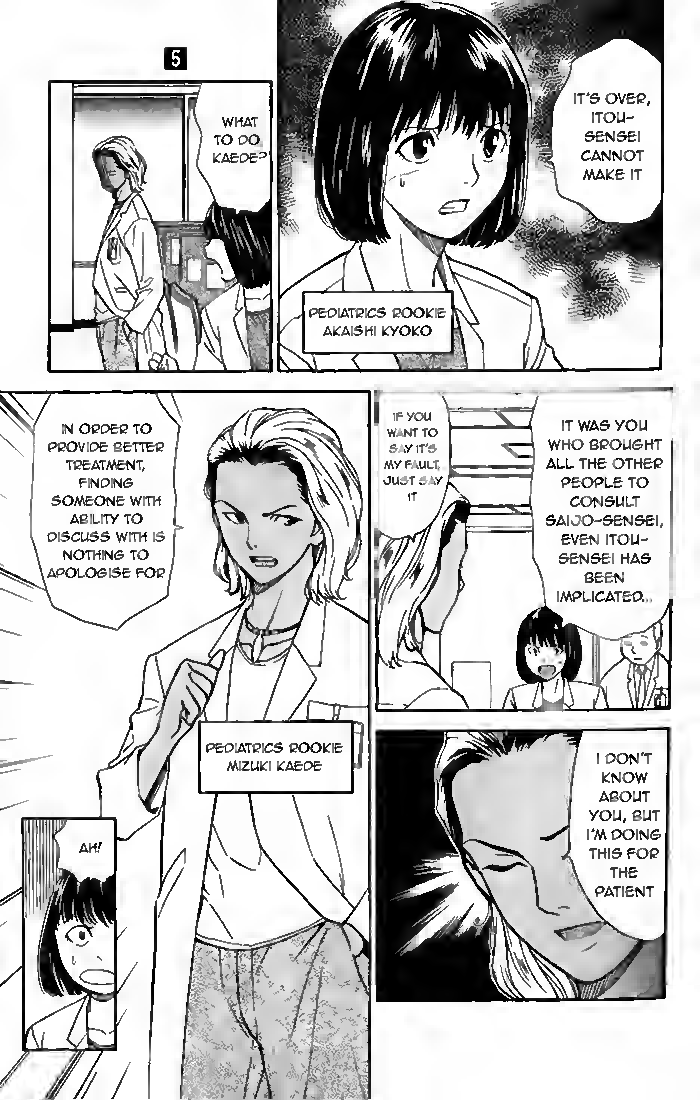

YES WE SHOULDN'T PROVOKE SUCH A PERSON
IT'S A DIFFICULT WOMAN


UWAH!


HOWEVER, COMPARING EYE POWER MY NATSUME WOULDN'T LOSE TO HER



SHE ACTUALLY HAS ANOTHER TRUMP CARD.
IF ONLY IT WAS JUST EYE POWER
!?
!?
IF THIS MATTER ISN'T HANDLED PROPERLY EVEN US ADULTS WILL TURN TO STONE
ITOU-SENSEI
ARE YOU ALRIGHT ITOU-SENSEI?
PEDIATRICS


5
WHAT TO DO, KAEDE?
IT'S OVER, ITOU-SENSEI CANNOT MAKE IT
PEDIATRICS ROOKIE AKAISHI KYOKO
IN ORDER TO PROVIDE BETTER TREATMENT, FINDING SOMEONE WITH ABILITY TO DISCUSS WITH IS NOTHING TO APOLOGISE FOR
PEDIATRICS ROOKIE MIZUKI KAEDE
AH!
IF YOU WANT TO SAY IT'S MY FAULT, JUST SAY IT
IT WAS YOU WHO BROUGHT ALL THE OTHER PEOPLE TO CONSULT SAIJO-SENSEI, EVEN ITOU-SENSEI HAS BEEN IMPLICATED...
I DON'T KNOW ABOUT YOU, BUT I'M DOING THIS FOR THE PATIENT

THE OTHER PERSON IS THAT SANO MEGUMI
I KNOW
WHAT ARE BEING SO PRETENTIOUS FOR, IDIOT!
OF COURSE THERE IS NOTHING GOOD ABOUT BEING AT ODDS WITH SUCH A PERSON
YOU STILL DO THIS EVEN THOUGH YOU KNOW IT
HER FATHER IS THE CHAIRMAN OF THE JAPANESE MEDICAL ASSOCIATION
THIS MEANS THAT HER INFLUENCE IS GREATER THAN AN IMPERIAL MINISTER
SAIJO-SENSEI ALSO DOESN'T CARE IF HE RECEIVES UNFAIR TREATEMENT, AND STRIVES TOWARDS HIS OWN JUSTICE
IT DOESN'T MATTER EVEN IF IT'S LIKE THAT

KAEDE IS THE KIND OF PERSON WHO IMAGINES HERSELF TO BE THE PROTAGONIST AFTER WATCHING A MOVIE
THIS PERSON CAN'T BE SAVED
AS A DOCTOR, THIS IS HOW IT SHOULD BE -
BECOMING A DOCTOR MUST HAVE BEEN DUE TO WATCHING A DRAMA SERIES ON DOCTORS WHILE IN JUNIOR HIGH
EVEN HER CURRENT SURFER APPEARANCE WAS DUE TO THE INFLUENCE OF THE SURFING MOVIE SHE JUST WATCHED.
UNDERSTAND WHAT?
KAEDE, WHAT YOU WANT TO DO IS UP TO YOU BUT DO YOU REALLY UNDERSTAND?
.. THAT'S WHY, EVEN IF I GET FIRED, IT DOESNT MATTER
ONCE IMMERSED SHE BECOMES BLINDED TO REALITY
SIGH

LISTEN CAREFULLY, OKAY?
YOU MAY NOT KNOW THIS, BUT MEGUMI'S FATHER AND THE REVIEW CHAIRMAN OF OUR HOSPITAL ARE LONG TIME FRIENDS
IF MEGUMI TAKES THIS SERIOUSLY, AT THE VERY LEAST IT WILL BRING SAIJO-SENSEI'S POSSIBILITY OF BEING 'SAIJOU NO MEII' DOWN ALL THE WAY TO ZERO—
OR EVEN DO SOMETHING MORE EXTREME
IN SIMPLE TERMS, EVERYTHING YOU ARE DOING IS PULLING THE INNOVENT SAIJO-SENSEI INTO THE WATER—
AND THE PERSON YOU ADMIRE IS GOING TO FALL INTO THE DEPTHS OF HELL BECAUSE OF YOU!
.....!!
1/2 SCANS

HI EVERYONE! THIS CHAPTER IS BROUGHT TO YOU BY:

1|2 SCANS

SPECIAL THANKS TO DJIDANEZOKAWA
FOR PROVIDING CLEAN SCANS FOR PAGES 1 TO 15

CLEANER:	HOXYHO
TRANSLATOR:	1|2PRINCE
TYPESETTER:	HOXYHO

Thanks for reading another chapter by 1|2 Scans.

1|2 Scans is looking for better quality raws and cleaners, perhaps a couple of C-E translators.

If you wanna help out or just have some questions, shoot us an email at 1|2@email.com

1|2 Scans hopes to completely scanlate Saijou no Meii and its sequel Saijou no Meii - The King of Neet.

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO

TYPESETTER
EPICCHI

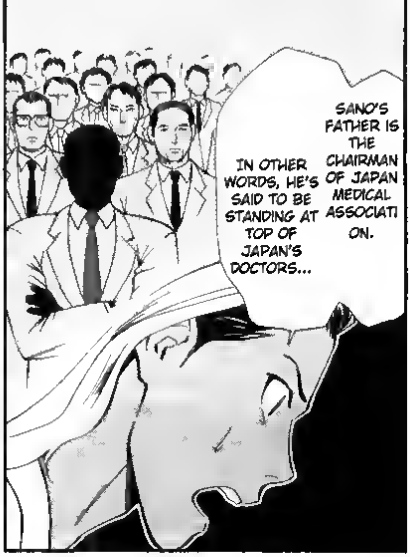
DISCLAIMER.
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

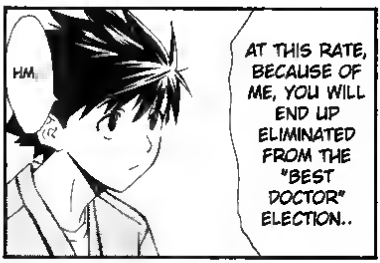
CHAPTER 38:
I AM I

I... I'VE GOT IT!
COME ON, KAEDE! DO IT PROPERLY!
SMACK
I'M TRULY SORRY, DR.SAIJOU!
TH-THAT'S NOT GOOD!
IN FACT, THERE'RE STILL NO TROUBLE BROUGHT UPON ME, SO EVEN IF YOU APOLOGIZE LIKE THAT...
H-HOLD IT, KAEDE-KUN.
BECAUSE OF MY SELFISH ACTS, I'VE UNKNOWINGLY BROUGHT TROUBLES TO YOU..

AND HE'S ALSO IN GOOD TERMS WITH CHAIRMAN TAIRA.


SANO'S FATHER IS THE CHAIRMAN OF JAPAN MEDICAL ASSOCIATION.
IN OTHER WORDS, HE'S SAID TO BE STANDING AT TOP OF JAPAN'S DOCTORS...

Y-YOU'RE ASKING ME WHAT...
SO WHAT IF I AM?


HM.
AT THIS RATE, BECAUSE OF ME, YOU WILL END UP ELIMINATED FROM THE "BEST DOCTOR" ELECTION..

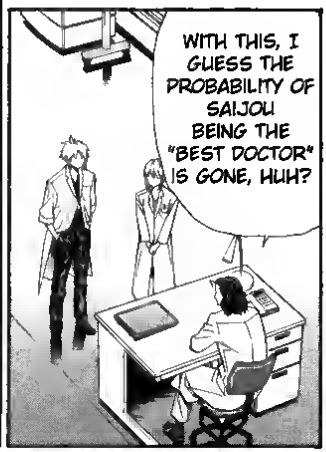
O-OF COURSE I'M NOT!
DON'T TELL ME YOU SEEK MY CONSULTATION BECAUSE I WAS ABOUT TO BE ELECTED AS THE "BEST DOCTOR"?

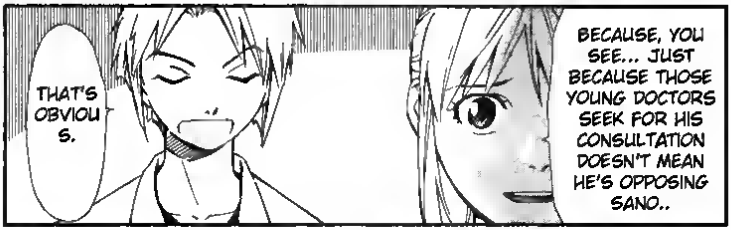
KAEDE-KUN,
WELL...

IT WAS PURELY OUT OF MY ADMIRATION TOWARDS YOU...
THEN, IT'S FINE.
WHETHER I'M ELECTED AS THE "BEST DOCTOR" OR NOT, I AM STILL MYSELF.
NOTHING WILL CHANGE.
.....
4
W-WAIT! WHY ARE YOU BEING FASCINATED THERE?
WHOA~ HE HE'S SO COOL~
SAME GOES FOR YOU, DR.SAIJOU.

INDEED, THEY MIGHT ALSO THINK THE SAME WAY AS YOU DO...
EVEN IF YOU'RE FINE WITH IT, WHAT ABOUT THOSE AROUND YOU?
.....
AREN'T FRIENDS SUPPOSED TO BE LIKE THAT?
BUT MORE THAN ANYTHING, I ALSO THINK THEY WANT ME TO STAY MYSELF.
SIGH
PEDIATRIC SURGERY DEPARTMENT

B-BUT, WE DON'T KNOW FOR CERTAIN YET, DO WE?
THAT'S WHAT YOU GET FOR HAVING SANO AS YOUR ENEMY.


WITH THIS, I GUESS THE PROBABILITY OF SAIJOU BEING THE "BEST DOCTOR" IS GONE, HUH?

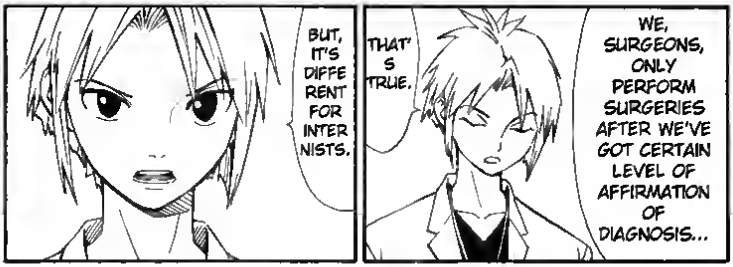

THAT'S OBVIOUS.
BECAUSE, YOU SEE... JUST BECAUSE THOSE YOUNG DOCTORS SEEK FOR HIS CONSULTATION DOESN'T MEAN HE'S OPPOSING SANO..

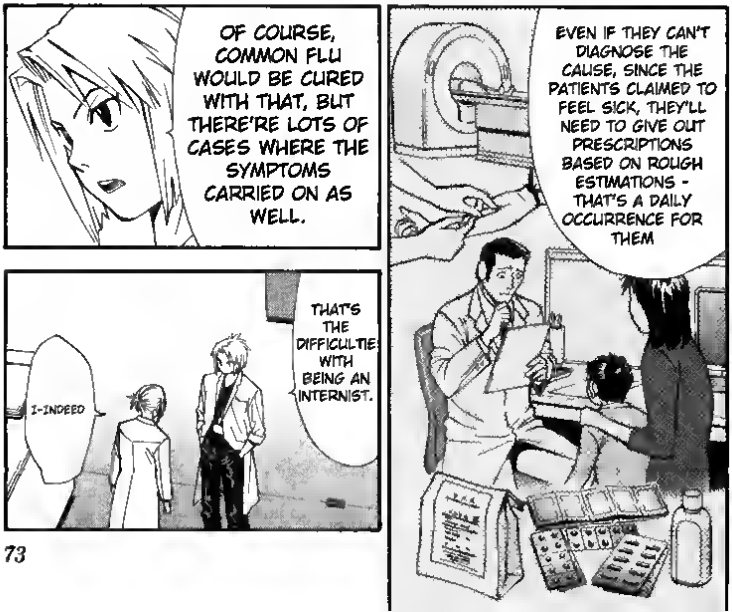
MYSTERIOUS ...
...DISEASES?

DIFFERENT FROM SURGEONS, PEOPLE IN INTERNAL MEDICINE DEAL WITH LOTS OF MYSTERIOUS DISEASES

IT MEANS OPPOSITION.

UP UNTIL NOW, HAVE YOU EVER CUT OPEN SOMEONE RELYING MERELY ON INSTINCT WITHOUT A CLEAR DIAGNOSIS?
OF COURSE NOT!

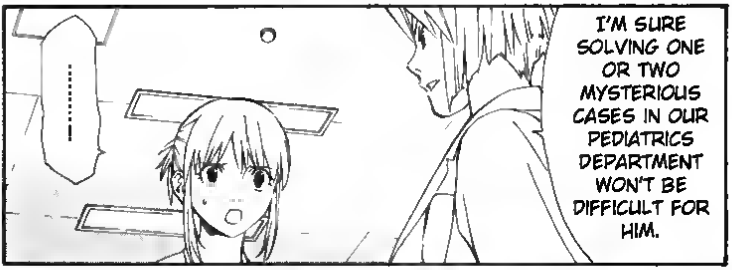

WE, SURGEONS, ONLY PERFORM SURGERIES AFTER WE'VE GOT CERTAIN LEVEL OF AFFIRMATION OF DIAGNOSIS...
THAT'S TRUE.
BUT, IT'S DIFFERENT FOR INTERNISTS.


EVEN IF THEY CAN'T DIAGNOSE THE CAUSE, SINCE THE PATIENTS CLAIMED TO FEEL SICK, THEY'LL NEED TO GIVE OUT PRESCRIPTIONS BASED ON ROUGH ESTIMATIONS - THAT'S A DAILY OCCURRENCE FOR THEM
OF COURSE, COMMON FLU WOULD BE CURED WITH THAT, BUT THERE'RE LOTS OF CASES WHERE THE SYMPTOMS CARRIED ON AS WELL.
THAT'S THE DIFFICULTIE WITH BEING AN INTERNIST.
I-INDEED

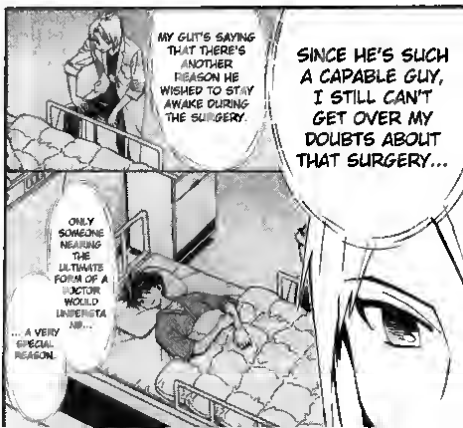
BEING A SURGEON, HE ONLY FOCUSES ON SURGERIES, BUT HIS INSIGHT IN INTERNAL DISEASES IS ALSO NOTHING ORDINARY.

IF THAT'S THE CASE, WHY DO YOU SAY IT MEANS OPPOSITION ?

BECAUSE MIKOTO'S A GENIUS.

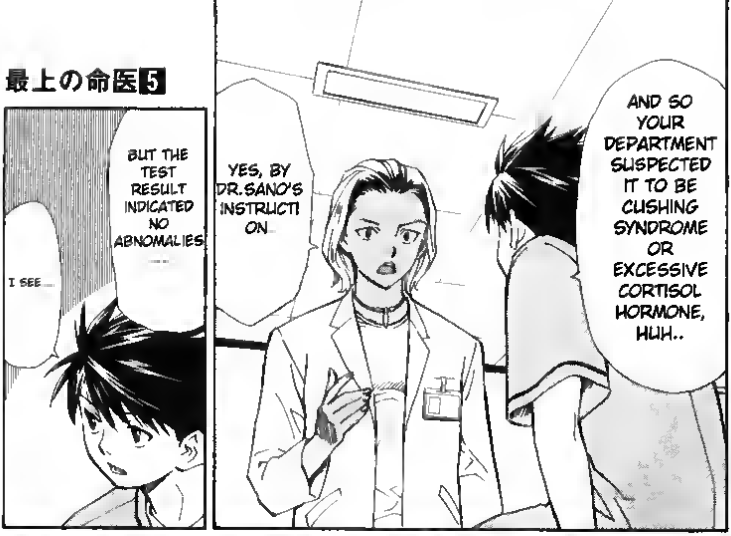

I'M SURE SOLVING ONE OR TWO MYSTERIOUS CASES IN OUR PEDIATRICS DEPARTMENT WON'T BE DIFFICULT FOR HIM.

IN THAT CASE, THE INTERNAL PEDIATRICS · IMAGE WOULD BE COMPLETELY DESTROYED, WOULDN'T IT?
THAT'S RIGHT.


MY GUT'S SAYING THAT THERE'S ANOTHER REASON HE WISHED TO STAY AWAKE DURING THE SURGERY.
SINCE HE'S SUCH A CAPABLE GUY, I STILL CAN'T GET OVER MY DOUBTS ABOUT THAT SURGERY...
ONLY SOMEONE NEARING THE ULTIMATE FORM OF A DOCTOR WOULD UNDERSTAND...
... A VERY SPECIAL REASON.

AFTER ALL, CONSIDERING THE PATIENT'S GROUND, IT'S THE BEST IF THOSE MYSTERIES CAN BE SOLVED, TOO.
BUT, IT'S NOT LIKE WE CAN TELL HIM IGNORE THOSE ROOKIES' CONSULTATI ONS...
WELL, IT'S A SHAME HE CAN'T BE THE "BEST DOCTOR", BUT MIKOTO'S STILL MIKOTO.
BY THE WAY, KAEDE -KUN
I'VE LOOKED THROUGH THE PATIENT'S CHARTS YOU'VE GIVEN ME...
.....
ONLY THIS WILL NEVER CHANGE.
9

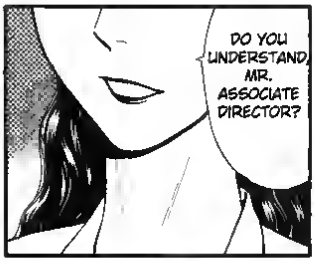
ACTUALLY, THERE'S A KID CAUGHT MY ATTENTION.
HIS NAME IS IITA YUUSHI-KUN...
AH, THAT'S RIGHT! THAT KID!
THAT KID HAS BEEN GIVING THE INTERNAL PEDIATRIC DEPARTMENT HEADACHES WITH HIS MYSTERIOUS DISEASE.
APPARENTLY, AROUND A YEAR AGO, HE SUDDENLY GOT FAT. AT FIRST, HIS PARENTS THOUGHT HE WAS BECOMING OBESE FROM OVER-EATING, BUT...
HIS BLOOD SUGAR LEVEL WAS NORMAL, BUT FOR SOME REASONS HE ALSO GETS DROWSY DURING CLASS...
HMM...


AND SO YOUR DEPARTMENT SUSPECTED IT TO BE CUSHING SYNDROME OR EXCESSIVE CORTISOL HORMONE, HUH..
YES, BY DR.SANO'S INSTRUCTI ON
BUT THE TEST RESULT INDICATED NO ABNOMALIES
I SEE...

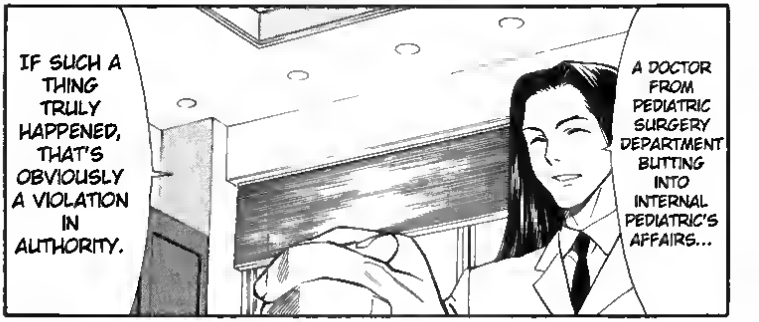
I STILL CAN'T SAY FOR SURE BUT ACCORDING FROM WHAT I SEE, ITA-KUN SUFFERS FROM A COMPLETELY DIFFERENT DISEASE.
IF POSSIBLE, I WANT TO HAVE A MEETING WITH HIM.
AND I'D LIKE TO DO ANOTHER TEST ON HIM.
G-GOT IT.
I'LL GO SET IT FOR YOU SO PLEASE WAIT FOR ME

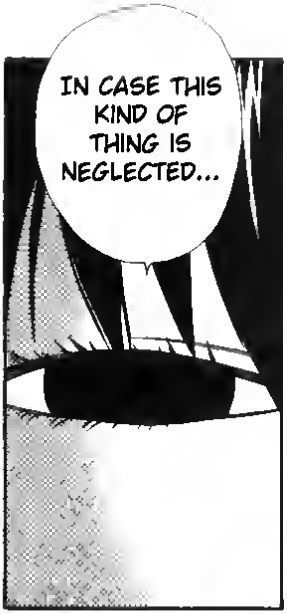
ASSOCIATE DIRECTOR OFFICE

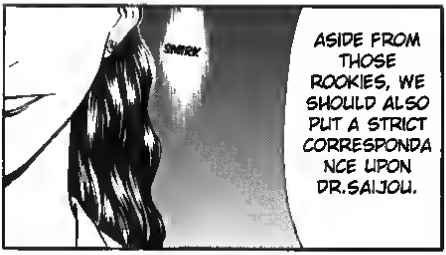
LET'S GO, KYOKO!
Y-YEAH.
NODS

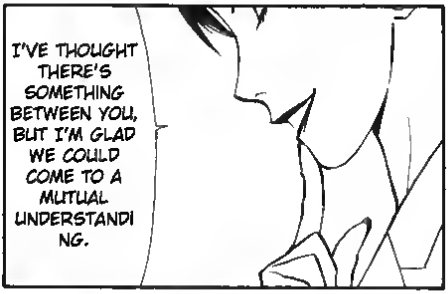

DO YOU UNDERSTAND, MR. ASSOCIATE DIRECTOR?

OF COURSE, DR.SANO.
IT'S NOT THAT I'M SAYING THIS OUT OF JEALOUSY.


IF SUCH A THING TRULY HAPPENED, THAT'S OBVIOUSLY A VIOLATION IN AUTHORITY.
A DOCTOR FROM PEDIATRIC SURGERY DEPARTMENT BUTTING INTO INTERNAL PEDIATRIC'S AFFAIRS...


IN CASE THIS KIND OF THING IS NEGLECTED...


SNIFFFF
ASIDE FROM THOSE ROOKIES, WE SHOULD ALSO PUT A STRICT CORRESPONDANCE UPON DR.SAIJOU.

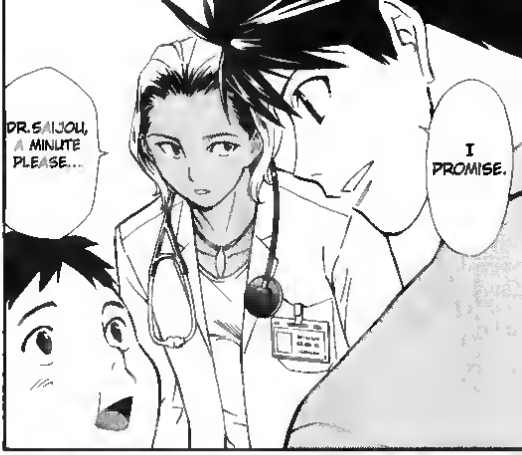

I'VE THOUGHT THERE'S SOMETHING BETWEEN YOU, BUT I'M GLAD WE COULD COME TO A MUTUAL UNDERSTANDING.

I'M SURE MY FATHER WON'T KEEP SILENT AS WELL

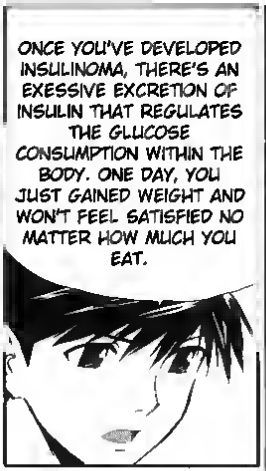
HMPH... SHE'S SUCH A SCARY WOMAN TO HIDE UNDER HER FATHER'S INFLUENCE.
BUT AS AN ALLY, THERE'S NO ONE AS INTERESTING AS HER AROUND
I'M NOT AT YOUR LEVEL OF EXPERTISE AS A DOCTOR, BUT THE ONE WHO'S GOING TO BECOME THE "BEST DOCTOR" IS ME, DR.SAIJOU
I SEE.
SO YUUSHI-KUN GETS HUNGRY ALL THE TIME, HUH?
YES.
NO MATTER HOW MUCH I EAT, I CAN'T FEEL FULL SO I KEPT EATING.
EVEN MY CLASSMATES SAY I'M LIKE A PIG...
BUT SINCE I KEEP FEELING HUNGRY, I DON'T FEEL LIKE STUDYING OR EXERCISING...
.....
THIS IS BAD

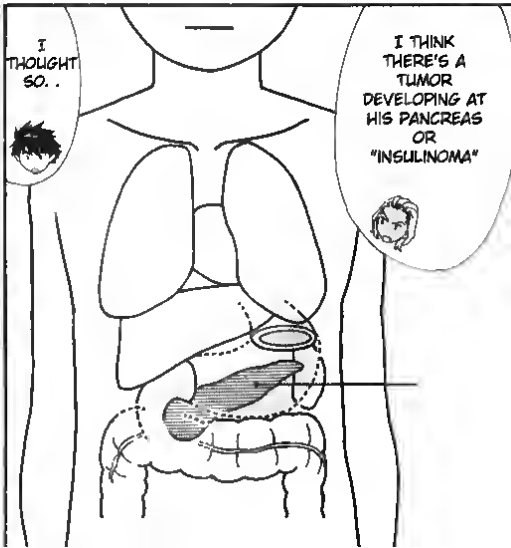
DR.MIZUKI PERFORMED A CHECK-UP ON YOU, DIDN'T SHE?
BUT IT'S ALRIGHT.
IT'S STARTING TO AFFECT HIS BRAIN. BUT...
THAT'S A PRETTY ORDINARY SICKNESS.
BECAUSE OF THIS, I'VE HATED GOING TO SCHOOL.
REALLY?
ONCE WE KNOW THE RESULT, YOU CAN BE CURED ONLY WITH A SIMPLE SURGERY.

YES, I'LL DEFINITELY CURE IT.
IF IT'S REALLY CURABLE, I WANT IT CURED AS SOON AS POSSIBLE



*selective arterial calcium infusion test


ONCE YOU'VE DEVELOPED INSULINOMA, THERE'S AN EXESSIVE EXCRETION OF INSULIN THAT REGULATES THE GLUCOSE CONSUMPTION WITHIN THE BODY. ONE DAY, YOU JUST GAINED WEIGHT AND WON'T FEEL SATISFIED NO MATTER HOW MUCH YOU EAT.



YES! THANKS TO YOU, DR.SAIJOU.
IT'S AN UNCOMMON CASE... MOREOVER, THE BLOOD SUGAR TEST RESULT WAS ALSO NORMAL SO YOU DON'T USUALLY COME UP WITH IT, BUT IT'S A GOOD THING WE REALIZED IT EARLY
THEN THE BRAIN WILL NOT RECEIVE ENOUGH GLUCOSE WHICH ENDANGER IT'S DEVELOPM ENT.
AND ONCE IT WORSENS, JUST LIKE YUUSHI-KUN, YOU'LL DEVELOP LETHARGY...
MOST INSULINOMA ARE SMALL, LESS THAN 2MM. SO I THINK PERHAPS IT'S TOO SMALL TO BE SEEN..
THE TUMOR THAT'S SUPPOSED TO BE IN HIS PANCREAS DIDN'T SHOW UP IN CT SCAN NOR MRI.
BUT, THERE' S A PROBL EM —
17
THE LONGER WE WAIT, THE WORSE IT IS FOR HIM.
NO.
SINCE WE CAN'T DETERMINE THE EXACT POSITION, WE ALSO CAN'T PERFORM SURGERY RIGHT AWAY.

HOW ARE WE SUPPOSED TO PERFORM SURGERY ON SOMETHING WHEN WE DON'T EVEN KNOW WHERE IT IS?
EVEN SO WE DON'T HAVE ANY OTHER OPTION...
B-BUT, DR. SAIJOU...
IN THIS CASE, WE NEED SURGERY RIGHT AWAY.
ANYWAY, WE'LL OPEN UP HIS STOMACH AND PERFORM AN ULTRASOUND TEST RIGHT AFTER.
IF THAT DOESN'T WORK OUT EITHER, THE REST IS ONLY INSTINCTS AND GUESSES...
I'M BETTING ON MY REPUTATION AS A SURGEON WITH THIS SURGERY!

SEND YOUR APPLICATION TO BCSCANS@GMAIL.COM OR VISIT OUR WEBSITE BLASTCOMICSCANS.WORDPRESS.COM FOR MORE INFORMATION!

Renzokusei Scans presents

Saijou no Meii Chapter 38 - I'm Still Me

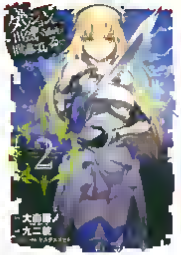
http://renzokuseiscans.blogspot.com/ #Renzokusei @ irc.rizonchighway.net @RZKScans

RAW PROVIDER - KNIGHTS WHO SAY NI
TRANSLATOR - ROANKUN
PROOFREADER - DEREK
CLEANER - DEREK
REDRAWER - DEREK
TYPESETTER - DEREK
QUALITY CHECKER - DEREK

WRITTEN BY HASHIGUCHI TAKASHI
IRIE KENZOE
DRAWN BY HASHIGUCHI TAKASHI
PUBLISHED BY SHOGAKUKAN
SERIALIZED IN SHUUKAN SHOUNEN SUNDAY

RENZOKUSEI SCANS IS IN NEED OF
HELP ON THE FOLLOWING SERIES

DAHMACHI



CLEANER

HIGHSCHOOL DXD

TRANSLATOR

HENTAI OUJI

TRANSLATOR

CRIME EDGE

TRANSLATOR
CLEANER

STRIKE THE BLOOD

TRANSLATOR

ORE TO ICHIHO

TRANSLATOR

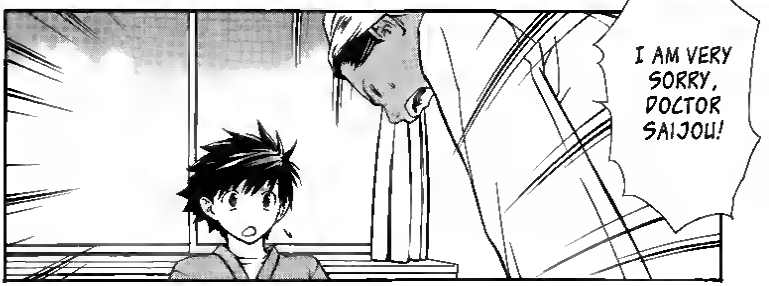
ONII AI

TRANSLATOR

Renzokusei Scans

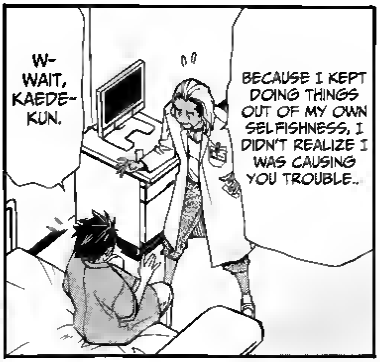
CHAPTER 38:
I'M STILL ME

I-I KNOW!
KAEDE! BOW YOUR HEAD!

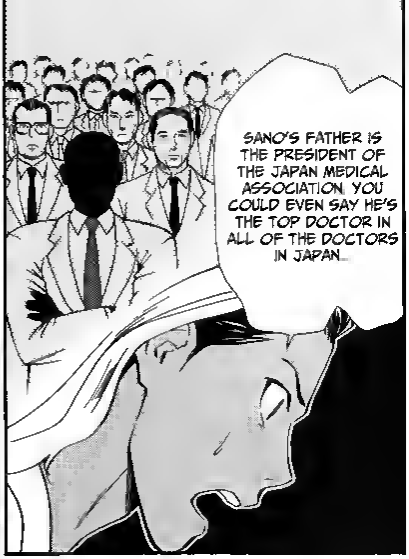

I AM VERY SORRY, DOCTOR SAIJOU!

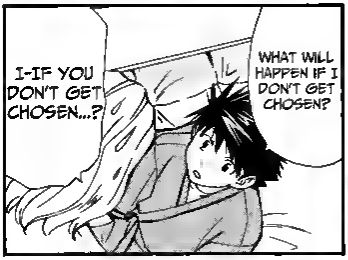
2

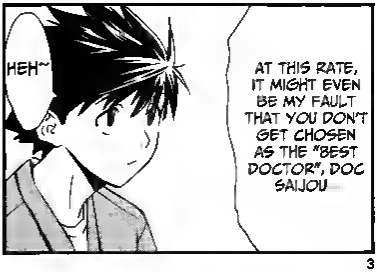
I-I CAN'T HAVE THAT!
TO BE HONEST, YOU HAVEN'T ACTUALLY CAUSED ME TROUBLE YET, SO THERE'S REALLY NO NEED TO APOLOGIZE..


W-WAIT, KAEDE-KUN.
BECAUSE I KEPT DOING THINGS OUT OF MY OWN SELFISHNESS, I DIDN'T REALIZE I WAS CAUSING YOU TROUBLE..

ON TOP OF THAT, HE AND CHAIRMAN TAIKA ARE EXCEPTIONALLY CLOSE...


SANO'S FATHER IS THE PRESIDENT OF THE JAPAN MEDICAL ASSOCIATION. YOU COULD EVEN SAY HE'S THE TOP DOCTOR IN ALL OF THE DOCTORS IN JAPAN...


I-IF YOU DON'T GET CHOSEN...?
WHAT WILL HAPPEN IF I DON'T GET CHOSEN?


HEH~
AT THIS RATE, IT MIGHT EVEN BE MY FAULT THAT YOU DON'T GET CHOSEN AS THE "BEST DOCTOR", DOC SAIJOU

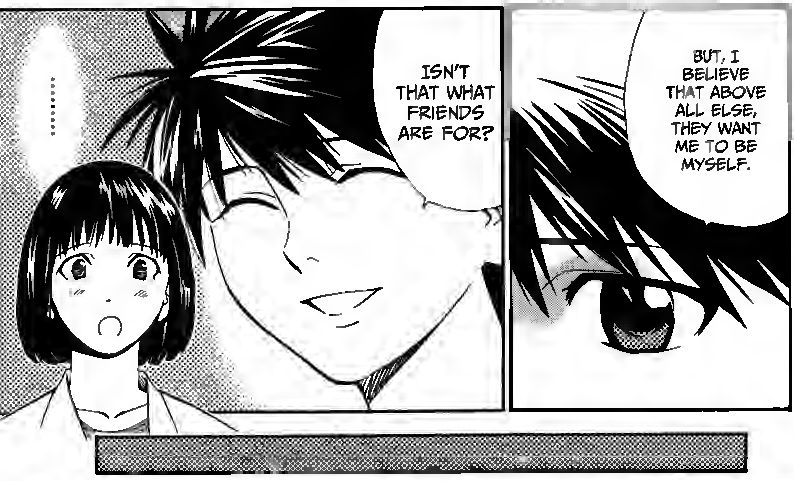
O-OF COURSE!
YOU CAME TO ME FOR HELP BECAUSE YOU THOUGHT I WAS QUALIFIED TO BE THE "BEST DOCTOR", RIGHT?

KAEDE-KUN,
WEEE-LL...

DOC SAIJOU, I JUST HONESTLY ADMIRED YOU, THAT'S WHY-
THEN THERE'S NO PROB-LEM.
WHETHER I GET CHOSEN AS THE "BEST DOCTOR" OR NOT, I'M STILL ME
THAT WON'T CHANGE.
.....
4
S-SO COOL ...
THIS ISN'T THE TIME TO BE IM-PRESSED!
YOU TOO, DOC SAIJOU!

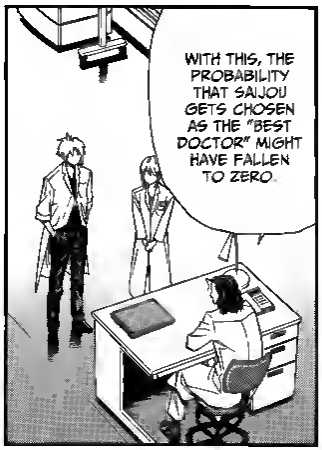
TRUE. EVERYONE ELSE MIGHT BE WISHING FOR ME TO GET THAT TITLE...
EVEN IF YOU'RE OKAY WITH IT, YOUR FRIENDS..

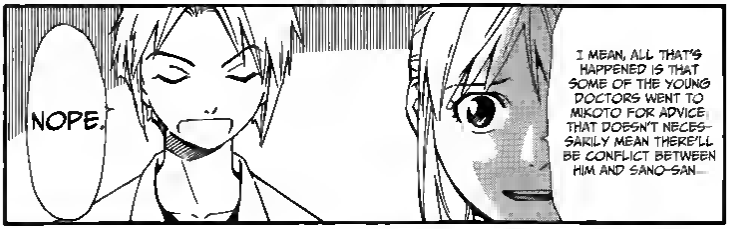
5


.....
ISN'T THAT WHAT FRIENDS ARE FOR?
BUT, I BELIEVE THAT ABOVE ALL ELSE, THEY WANT ME TO BE MYSELF.

Pediatric Surgery

B-BUT, IT'S NOT LIKE THAT'S SET IN STONE ALREADY, RIGHT?
THAT'S WHAT IT MEANS TO MAKE AN ENEMY OF SANO-

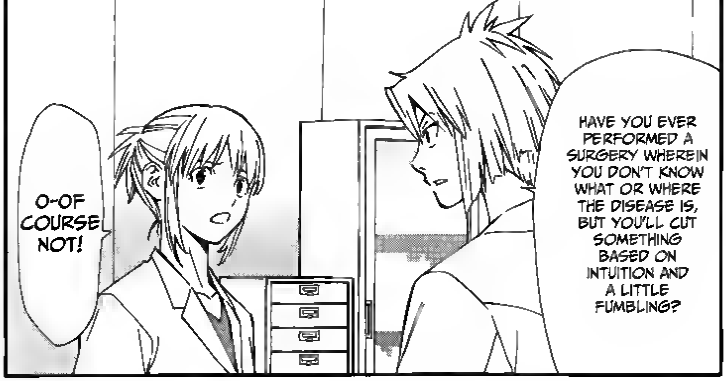

WITH THIS, THE PROBABILITY THAT SAIJOU GETS CHOSEN AS THE "BEST DOCTOR" MIGHT HAVE FALLEN TO ZERO.

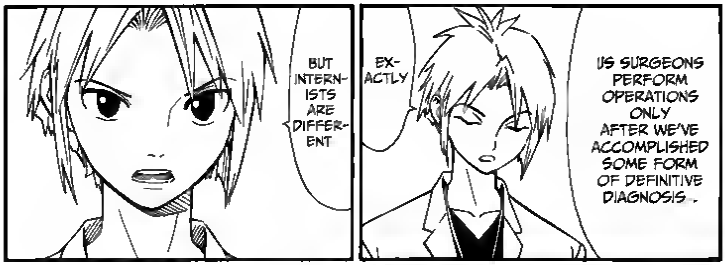

NOPE.
I MEAN, ALL THAT'S HAPPENED IS THAT SOME OF THE YOUNG DOCTORS WENT TO MIKOTO FOR ADVICE. THAT DOESN'T NECESSARILY MEAN THERE'LL BE CONFLICT BETWEEN HIM AND SANO-SAN.

MYS-TERI-OUS..
DIS-EASES?

INTERNAL MEDICINE, UNLIKE SURGERY, INVOLVES A LOT OF MYSTERIOUS DISEASES

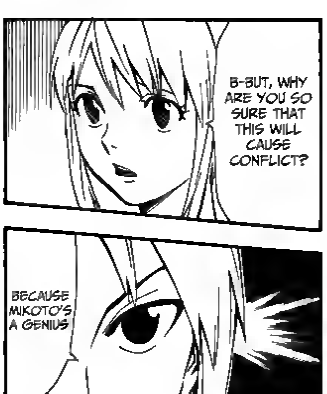
THERE'LL DEFINITELY BE CON-FLICT.

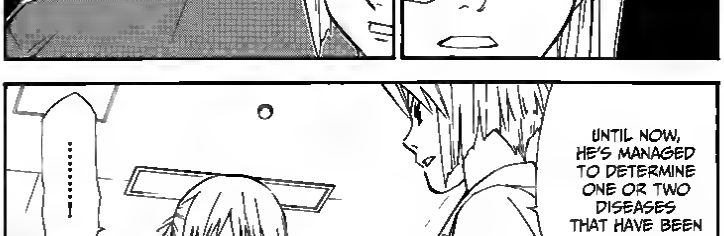

HAVE YOU EVER PERFORMED A SURGERY WHEREIN YOU DON'T KNOW WHAT OR WHERE THE DISEASE IS, BUT YOU'LL CUT SOMETHING BASED ON INTUITION AND A LITTLE FUMBLING?
O-OF COURSE NOT!


IS SURGEONS PERFORM OPERATIONS ONLY AFTER WE'VE ACCOMPLISHED SOME FORM OF DEFINITIVE DIAGNOSIS.
EX-ACTLY
BUT INTERN-ISTS ARE DIFFER-ENT

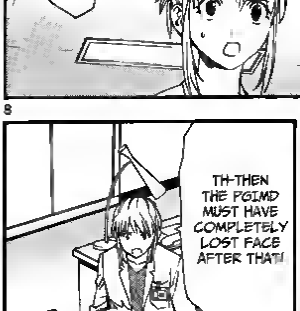
7

IT'S COMMON PRACTICE FOR INTERNISTS TO PRESCRIBE MEDICINE BASED ON PROSPECTS, EVEN IF THEY CAN'T FIGURE OUT THE DISEASE EVEN AFTER EXAMINATION BECAUSE THEIR PATIENTS ARE IN POOR HEALTH.
OF COURSE, IF IT WAS JUST A SIMPLE COLD, THEN THEY'D GET WELL SOON. BUT MORE OFTEN THAN NOT, THE MYSTERIOUS SYMPTONS WOULD CONTINUE, UNCURED.
THAT'S THE DIFFICULT SIDE OF INTERNAL MEDICINE.
T-TRUE ENOUGH



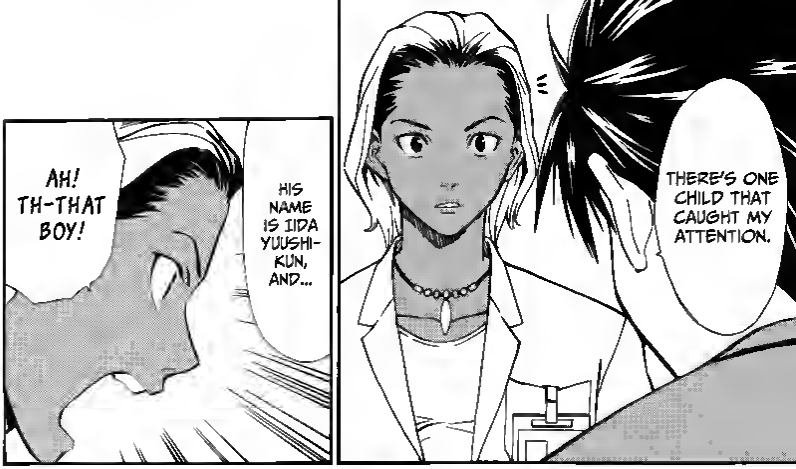


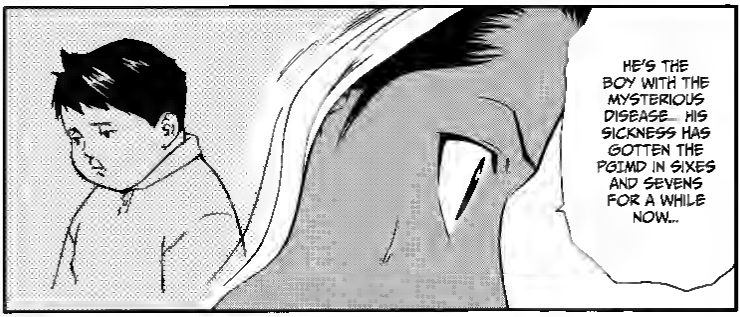
TL Note: PGIMD = Pediatric General Internal Medicine Department



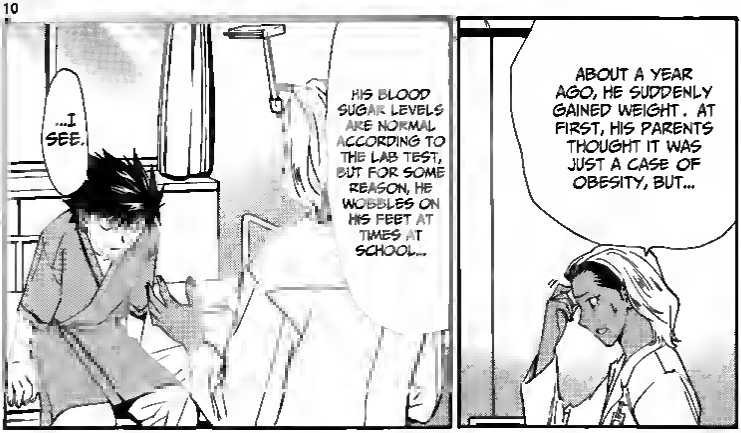
I BELIEVE THAT MIKOTO HAS A DIFFERENT REASON WHY HE WANTED TO STAY AWAKE DURING THE SURGERY.
HE'S THAT AMAZING A GUY, THAT'S WHY SOMETHING'S BEEN BOTHERING ME SINCE THAT SURGERY...
A REASON THAT ONLY THOSE WHO HAVE COME CLOSE TO BECOMING THE ULTIMATE DOCTOR CAN UNDERSTAND -
SOME SPECIAL REASON

IN THE FIRST PLACE, IF YOU THINK OF IT FROM THE PATIENT'S PERSPECTIVE, IT'S A WONDERFUL THING FOR THE "MYSTERY" OF YOUR DISEASE TO BE UNRAVELED.
BUT STILL, IT'S NOT LIKE I CAN GO AND TELL HIM NOT TO LET THE YOUNG DOCTORS OF THE FGIMD CONSULT HIM NOW...
WELL, IT'S A REAL SHAME THAT HE WON'T BE CHOSEN AS THE "BEST DOCTOR", BUT... MIKOTO'S STILL MIKOTO.
AND THERE'S NOTHING WE CAN DO ABOUT THAT.
.....
AND SO, KAEDE-KUN,
AFTER LOOKING AT THE MEDICAL RECORDS OF THE PATIENTS YOU GUYS HAVE CONSULTED WITH ME ABOUT...


THERE'S ONE CHILD THAT CAUGHT MY ATTENTION.
HIS NAME IS IIDA YUUSHI-KUN, AND...
AH! TH-THAT BOY!


HE'S THE BOY WITH THE MYSTERIOUS DISEASE... HIS SICKNESS HAS GOTTEN THE PGIMD IN SIXES AND SEVENS FOR A WHILE NOW...

10

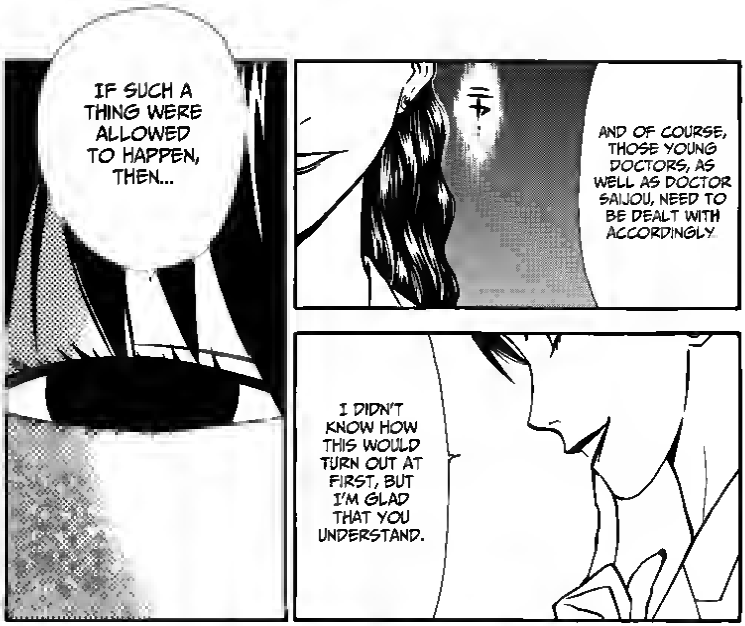

ABOUT A YEAR AGO, HE SUDDENLY GAINED WEIGHT. AT FIRST, HIS PARENTS THOUGHT IT WAS JUST A CASE OF OBESITY, BUT...
HIS BLOOD SUGAR LEVELS ARE NORMAL ACCORDING TO THE LAB TEST, BUT FOR SOME REASON, HE WOBBLES ON HIS FEET AT TIMES AT SCHOOL...
...I SEE.

AND THAT'S WHY THE PGIMD SUSPECTS HIM OF HAVING CUSHING SYNDROME OR SOME DISEASE OF THE ENDOCRINE SYSTEM.
YES, AS PER DOCTOR SANO'S INSTRUC-TIONS.
BUT THE LAB TESTS HAVE SHOWN NOTHING OUT OF THE ORDINARY...
I SEE...

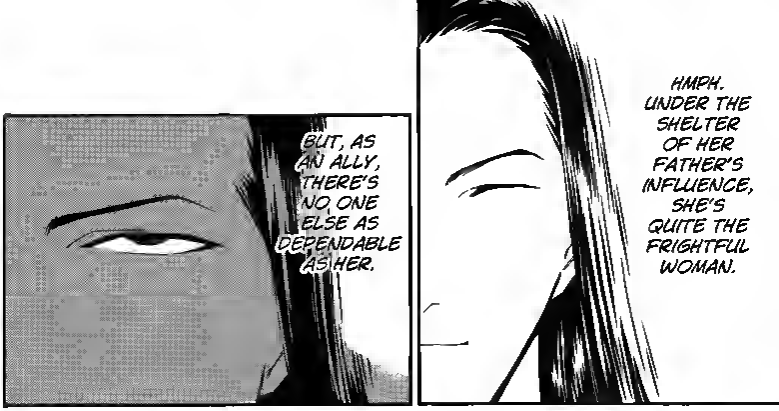
I CAN'T SAY FOR SURE YET, BUT FROM WHAT I GATHER, IIDA-KUN'S SICKNESS IS MOST PROBABLY SOMETHING ELSE ENTIRELY.
IF POSSIBLE, I'D LIKE TO MEET THAT BOY.
AND I WANT HIM TO UNDERGO A DIFFERENT EXAMINA-TION
U-UNDER STOOD.
I'LL DO THE NECESSARY PREPARATIONS, SO PLEASE WAIT.

Vice President's Office
HURRY, KYOUKO!
O-OKAY.
DO YOU UNDERSTAND, MR VICE PRESIDENT?
I'M NOT SAYING THIS OUT OF JEALOUSY OR ANYTHING OF THE SORT.
OF COURSE, DOCTOR SANO.
IF A DOCTOR FROM THE PSD INTERFERED WITH THE DIAGNOSIS OF A DOCTOR FROM THE PGIMD—
IF SUCH A THING HAPPENS, THEN THAT DOCTOR WOULD CLEARLY BE OVER-STEPPING HIS AUTHORITY.

12


IF SUCH A THING WERE ALLOWED TO HAPPEN, THEN...
AND OF COURSE, THOSE YOUNG DOCTORS, AS WELL AS DOCTOR SAIJOU, NEED TO BE DEALT WITH ACCORDINGLY.
I DIDN'T KNOW HOW THIS WOULD TURN OUT AT FIRST, BUT I'M GLAD THAT YOU UNDERSTAND.

I DOUBT MY FATHER WOULD FORGIVE THEM.


HMPH. UNDER THE SHELTER OF HER FATHER'S INFLUENCE, SHE'S QUITE THE FRIGHTFUL WOMAN.
BUT, AS AN ALLY, THERE'S NO ONE ELSE AS DEPENDABLE AS HER.

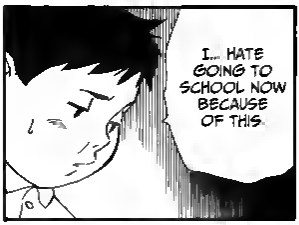
AS A DOCTOR, YOU MIGHT BE FAR OUT OF MY REACH. BUT... IN REALITY, IT APPEARS THAT THE ONE TO BE HAILED AS THE "BEST DOCTOR" WOULD BE ME, DOCTOR SAIJOU.
I SEE.
SO YOU GET HUNGRY EASILY, HUH, YUUSHI-KUN.
YEAH.

THIS IS BAD...
.....
BUT, I REALLY FEEL HUNGRY... AND I JUST CAN'T GET WORKED UP OVER STUDYING OR EXERCISE...
MY CLASSMATES SAID I WAS LIKE A PIG...
IT'S LIKE, NO MATTER HOW MUCH I EAT, I JUST DON'T GET FULL... S/WHY I CAN'T STOP MYSELF FROM EATING...

DOC MIZUKI EXAMINED YOU, RIGHT, YUUSHI-KUN?

DON'T WORRY. YOU'LL BE FINE
SO IT'S STARTED TO AFFECT HIS BRAIN, TOO...

YOU'RE JUST SICK, THAT'S ALL.

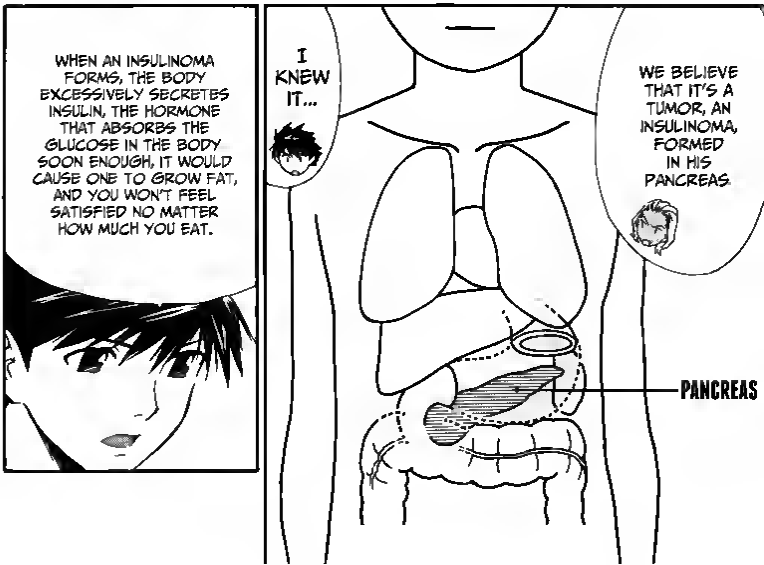

I... HATE GOING TO SCHOOL NOW BECAUSE OF THIS.

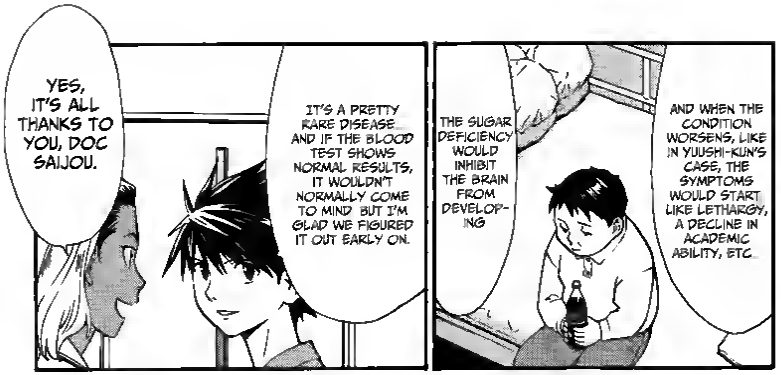
REAL-LY?
ONCE WE ANALYZE THE RESULTS, A SIMPLE SURGERY WILL BE ALL WE NEED TO CURE YOU

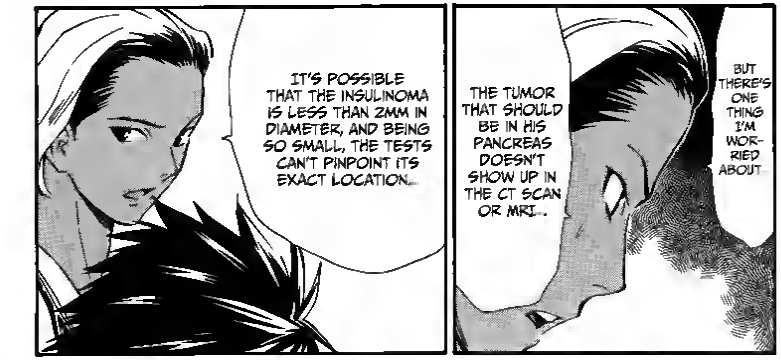
SURE. WE'LL DEFINITELY CURE YOU.
IF YOU'RE GOING TO CURE ME, PLEASE CURE ME QUICK!

DOC SAIJOU, A MOMENT PLEASE
I PROM-ISE.
HERE ARE THE RESULTS OF THE EXAMINA-TION

AS YOU ORDERED, WHEN WE PERFORMED THE CALCIUM INFUSION TEST ON HIM, THERE WAS A REACTION IN HIS SUPERIOR MESENTERIC ARTERY AND GASTRODUODENAL ARTERY

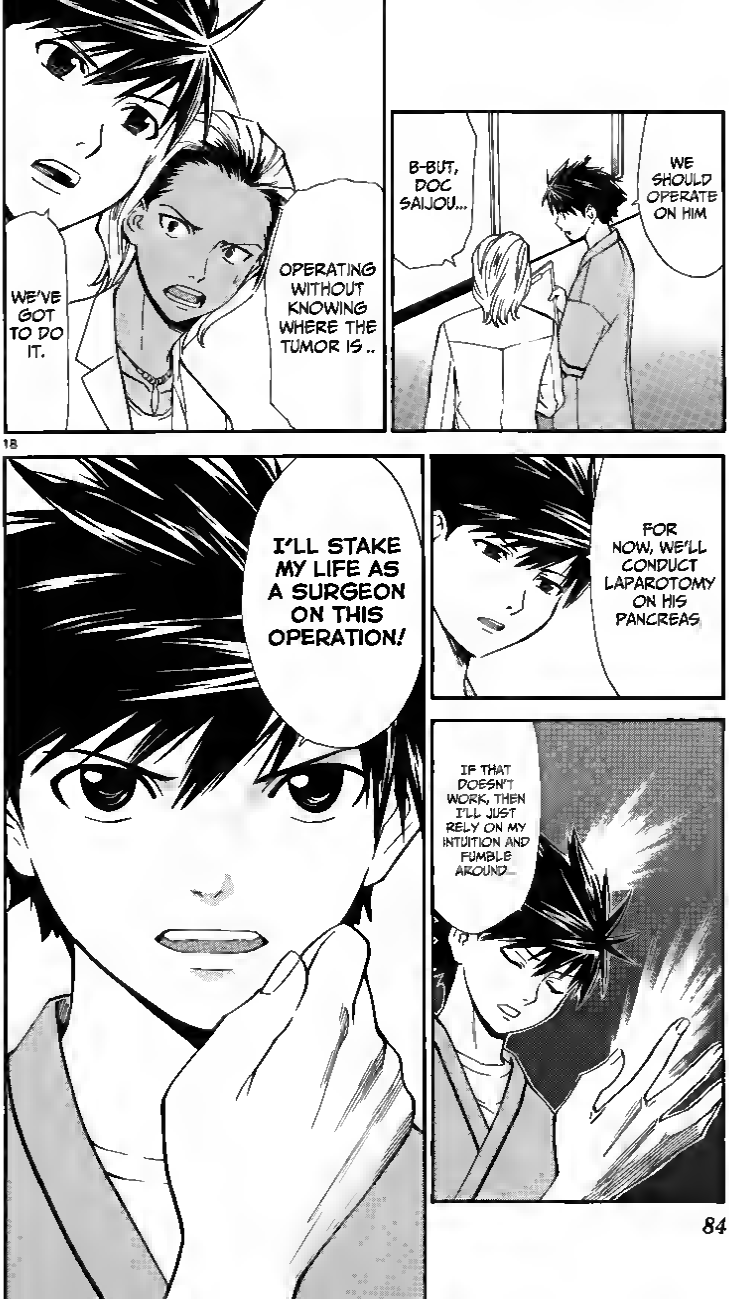

WHEN AN INSULINOMA FORMS, THE BODY EXCESSIVELY SECRETES INSULIN, THE HORMONE THAT ABSORBS THE GLUCOSE IN THE BODY SOON ENOUGH, IT WOULD CAUSE ONE TO GROW FAT, AND YOU WON'T FEEL SATISFIED NO MATTER HOW MUCH YOU EAT.
I KNEW IT...
WE BELIEVE THAT IT'S A TUMOR, AN INSULINOMA, FORMED IN HIS PANCREAS.
PANCREAS


YES, IT'S ALL THANKS TO YOU, DOC SAIJOU.
IT'S A PRETTY RARE DISEASE... AND IF THE BLOOD TEST SHOWS NORMAL RESULTS, IT WOULDN'T NORMALLY COME TO MIND. BUT I'M GLAD WE FIGURED IT OUT EARLY ON.
THE SUGAR DEFICIENCY WOULD INHIBIT THE BRAIN FROM DEVELOP-ING
AND WHEN THE CONDITION WORSENS, LIKE IN YUUSHI-KUN'S CASE, THE SYMPTOMS WOULD START LIKE LETHARGY, A DECLINE IN ACADEMIC ABILITY, ETC.


IT'S POSSIBLE THAT THE INSULINOMA IS LESS THAN 2MM IN DIAMETER, AND BEING SO SMALL, THE TESTS CAN'T PINPOINT ITS EXACT LOCATION...
THE TUMOR THAT SHOULD BE IN HIS PANCREAS DOESN'T SHOW UP IN THE CT SCAN OR MRI...
BUT THERE'S ONE THING I'M WOR-RIED ABOUT...

17

THE MORE WE WAIT, THE WORSE IT IS FOR YUUSHI-KUN.
NO.
AND WITHOUT KNOWING WHERE THE TUMOR IS, WE WON'T BE ABLE TO PERFORM THE SURGERY RIGHT AWAY.


WE'VE GOT TO DO IT.
OPERATING WITHOUT KNOWING WHERE THE TUMOR IS..
B-BUT, DOC SAIJOU...
WE SHOULD OPERATE ON HIM
FOR NOW, WE'LL CONDUCT LAPAROTOMY ON HIS PANCREAS
I'LL STAKE MY LIFE AS A SURGEON ON THIS OPERATION!
IF THAT DOESN'T WORK, THEN I'LL JUST RELY ON MY INTUITION AND FUMBLE AROUND...

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO

CLEANER
FIRSTBLOOD116

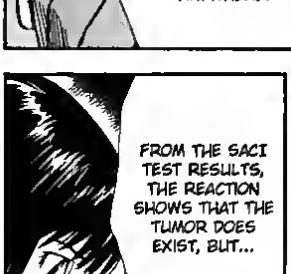
DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

CHAPTER 39:
THE INVISIBLE TUMOR

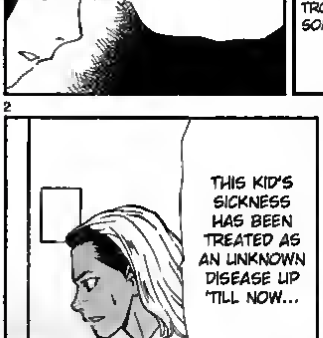
NO MATTER HOW MANY TIMES I'VE LOOKED AT HIS CT OR MRI SCAN, I CAN'T FIND IT ANYWHERE.

HOW'S IT GOING? CAN YOU FIND THE TUMOR?
NO.


FROM THE SACI TEST RESULTS, THE REACTION SHOWS THAT THE TUMOR DOES EXIST, BUT...

AT THIS RATE, IT WILL REALLY END UP AS A SURGERY RELYING ON INSTINCTS AS DR.SAIJOU SAID.
THIS IS QUITE TROUBLE-SOME...

2


THIS KID'S SICKNESS HAS BEEN TREATED AS AN UNKNOWN DISEASE UP 'TILL NOW...

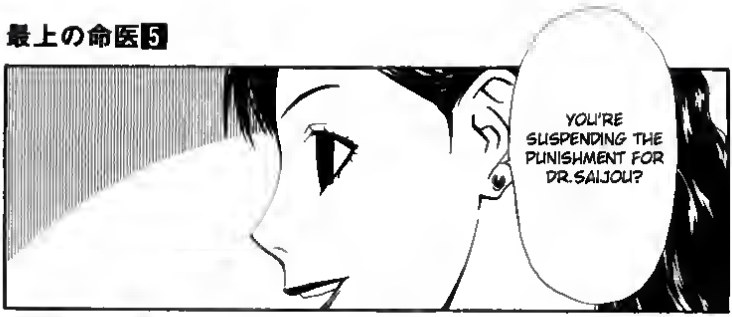
STOP JOKING AROUND!!
COULD IT BE THAT YOU MESSED UP WITH THE TEST?

WHY DID DR.SAIJOU SUSPECT IT TO BE INSULINOMA RIGHT AFTER HE SAW IT?
BUT THERE'S SOMETHING THAT INTRIGUED ME.
?
OF COURSE I'D HAVE GIVE THE TEST WITH THE UTMOST CARE.
S-...
SORRY.
3
WHO KNOWS ..
BUT ITA-KUN'S BLOOD GLUCOSE LEVEL WAS NORMAL, WASN'T IT?
INSULINOMA HAS SYMPTOMS WHERE THERE IS EXCESSIVE PRODUCTION OF INSULIN THAT BREAKS GLUCOSE APART SO THE BLOOD GLUCOSE LEVEL SHOULD BE LOW
TO BE HONEST, I AM VERY CURIOUS AS WELL, BUT DR.SAIJOU TALKED LIKE THIS WAS SOMETHING NORMAL, SO I JUST THOUGHT MAYBE THAT'S THE CASE...
YOU'RE RIGHT...
I STILL CAN'T SAY FOR SURE, BUT ACCORDING FROM WHAT I SEE, ITA-KUN SUFFERS FROM A COMPLETELY DIFFERENT DISEASE.
I SEE.
BUT THE TEST RESULTS INDICATED NO ANOMALIES.
YES! THANKS TO YOU, DR.SAIJOU.
IT'S AN UNCOMMON CASE. MOREOVER, THE BLOOD SUGAR TEST RESULT WAS NORMAL SO YOU DON'T USUALLY COME UP WITH IT. BUT IT'S A GOOD THING WE REALIZED IT EARLY

THAT'S NOT WHAT I MEANT... BUT, IF WE CUT HIM OPEN AND WE STILL CAN'T FIND THE TUMOR, THEN IT'LL BE A BIG PROBLEM.
WHAT? ARE YOU DOUBTING DR.SAIJOU?
WELL, LET'S HOPE THAT'S THE CASE ...

4

SIGN: ASSOCIATE DIRECTOR'S OFFICE


YOU'RE SUSPENDING THE PUNISHMENT FOR DR.SAIJOU?

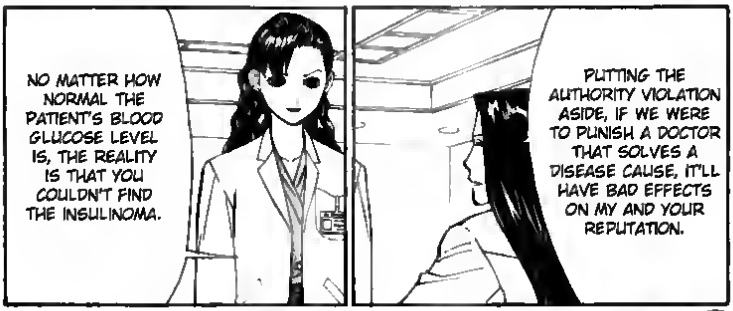
DIDN'T YOU SAID YOURSELF THAT YOU'LL GIVE DR.SAIJOU A STRICT CORRESPONDENCE?
A DOCTOR FROM THE PEDIATRIC SURGERY DEPARTMENT BUTTING INTO INTERNAL PEDIATRICS AFFAIRS.
IF SUCH A THING TRULY HAPPENING, THAT'S OBVIOUSLY A VIOLATION IN AUTHORITY
APART FROM THOSE MATTERS, WE SHOULD ALSO PUT A STRICT CORRESPONDENCE UPON DR. SAIJOU.

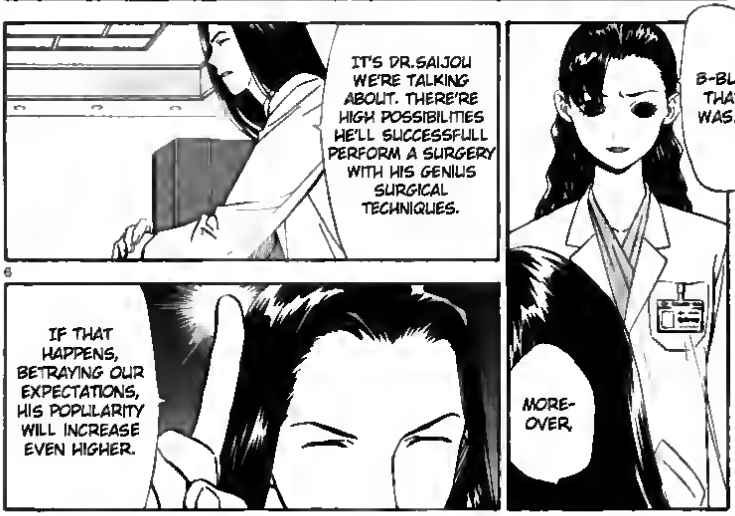
WHAT DO YOU MEAN BY THAT, MR.ASSOCIATE DIRECTOR?

5

I UNDERSTAND YOU FEEL UPSET.
PLEASE DON'T JUMP TO QUICK CONCLUSIONS.
WOULD YOU MIND EXPLAINING THAT TO ME?

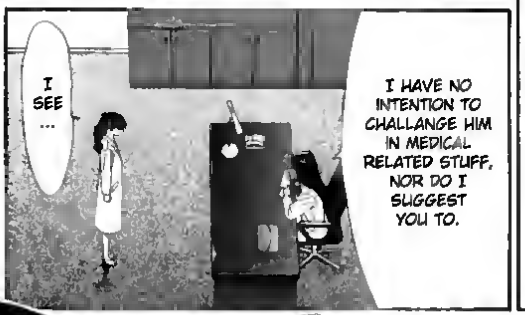
I THOUGHT SO!
I THINK THERE'S A TUMOR DEVELOPING AT HIS PANCREAS OR "INSULINOMA"
B-BUT IT
AND I'D LIKE TO DO ANOTHER TEST ON HIM.
AS YOU'VE TOLD ME TO, I DID A SACI TEST AND THERE'RE REACTIONS AT THE SUPERIOR MESENTERIC AND GASTRODUODENAL ARTERIES.
BUT SAIJOU MANAGED TO FIND THE CAUSE OF THE PATIENT'S DISEASE AFTER HE INSTRUCTED THE ROOKIES AT INTERNAL PEDIATRICS TO DO SACI TEST.


NO MATTER HOW NORMAL THE PATIENT'S BLOOD GLUCOSE LEVEL IS, THE REALITY IS THAT YOU COULDN'T FIND THE INSULINOMA.
PUTTING THE AUTHORITY VIOLATION ASIDE, IF WE WERE TO PUNISH A DOCTOR THAT SOLVES A DISEASE CAUSE, IT'LL HAVE BAD EFFECTS ON MY AND YOUR REPUTATION.


IT'S DR.SAIJOU WE'RE TALKING ABOUT. THERE'RE HIGH POSSIBILITIES HE'LL SUCCESSFULL PERFORM A SURGERY WITH HIS GENIUS SURGICAL TECHNIQUES.
B-BUT.. THAT WAS...
IF THAT HAPPENS, BETRAYING OUR EXPECTATIONS, HIS POPULARITY WILL INCREASE EVEN HIGHER.
MORE-OVER,

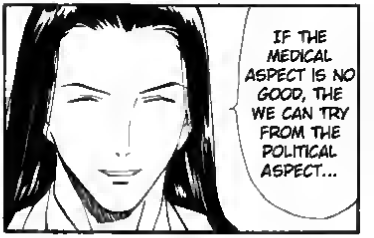
THE OTHER DAY, I WENT AS FAR AS BRINGING THE CHANCELLOR INTO BATTLE WHICH WAS THE FINAL BATTLE FOR ME.

YOU SHOULD HAVE HEARD THE RUMOURS, I'VE ALWAYS LOST TO HIM.


I HAVE NO INTENTION TO CHALLANGE HIM IN MEDICAL RELATED STUFF, NOR DO I SUGGEST YOU TO.
I SEE ...

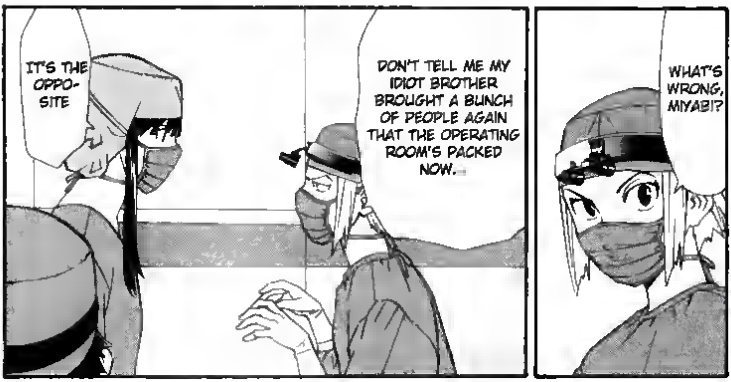
BY USING YOUR FATHER...

IT'S SIMPLE.
SO WHAT'RE YOU SUGGES-TING US TO DO?


IF THE MEDICAL ASPECT IS NO GOOD, THE WE CAN TRY FROM THE POLITICAL ASPECT...

DO YOU UNDERSTAND, MIKOTO? I'VE NOT FULLY AGREED TO THIS YET.
YOU JUST HAD YOUR HEART BYPASS A WEEK AGO...
NORMALLY, YOU'D NEED 2 WEEKS REST AND YET...
DON'T WORRY.
AFTER THIS IS OVER, I'LL PROPERLY REST FOR THE REMAINING WEEK.
THAT'S NOT WHAT I MEANT.
CALM DOWN.
AA-KUN, YOU'RE SUCH A WORRY-WART. IN OTHER COUNTRIES, THERE ARE EVEN HEART BYPASS CASES WHERE THE PATIENTS DISCHARGED 3 DAYS AFTER THE SURGERY, YOU KNOW?
HMPH
WELL, THAT'S ALSO A FACT.

OI, GUYS!
BUT IN MIKOTO'S CASE ..


IT'S THE OPPO-SITE
DON'T TELL ME MY IDIOT BROTHER BROUGHT A BUNCH OF PEOPLE AGAIN THAT THE OPERATING ROOM'S PACKED NOW..
WHAT'S WRONG, MIYAB!?

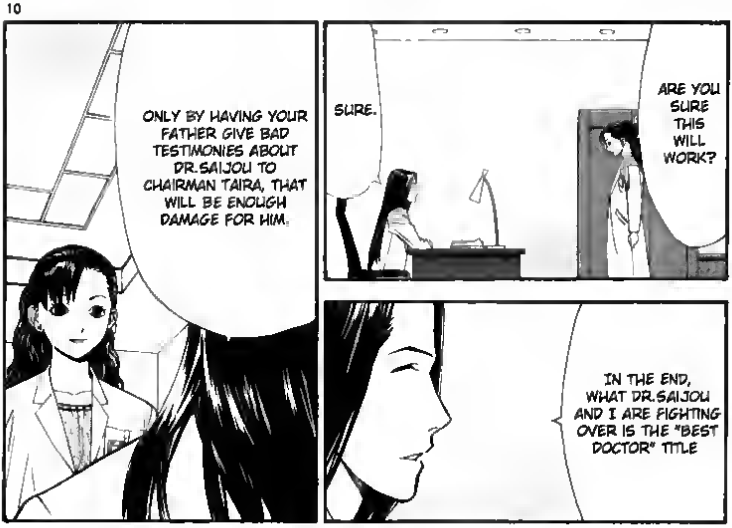
9

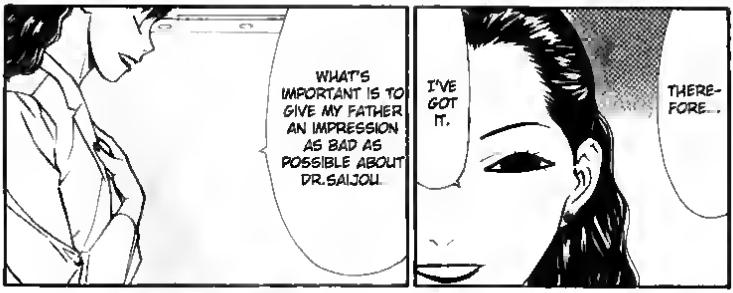
ALL OF SUDDEN, THE PRESIDENT OF JAPAN'S MEDICAL ASSOCIATION IN OTHER WORDS...
OTHER RUMOUR?
THE OBSERVERS ARE ONLY KAEDE-KUN, KYOKO-SAN AND SOME OTHERS .. THE WHOLE HOSPITAL IS FUSSING OVER OTHER RUMOUR THAT THEY DON'T SEEM GIVE A CARE FOR THIS...

!
SANO'S FATHER IS RUMOURED TO BE VISITING CHAIRMAN TAIRA TODAY.

Associate Director Office

10


ONLY BY HAVING YOUR FATHER GIVE BAD TESTIMONIES ABOUT DR.SAIJOU TO CHAIRMAN TAIRA, THAT WILL BE ENOUGH DAMAGE FOR HIM.
SURE.
ARE YOU SURE THIS WILL WORK?
IN THE END, WHAT DR.SAIJOU AND I ARE FIGHTING OVER IS THE "BEST DOCTOR" TITLE

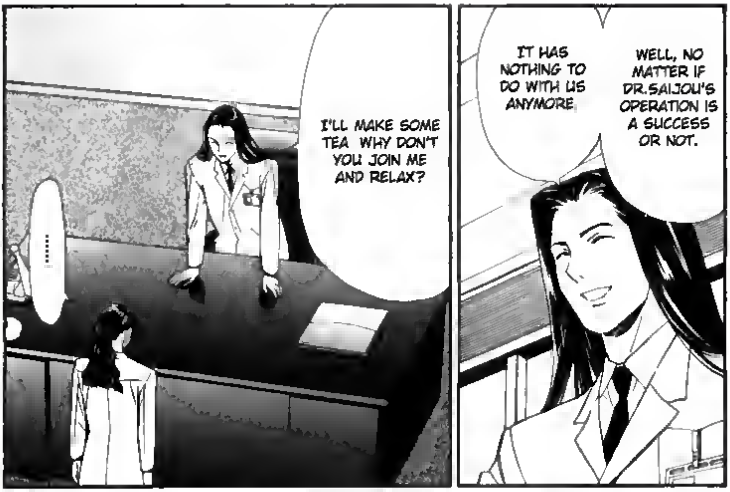

WHAT'S IMPORTANT IS TO GIVE MY FATHER AN IMPRESSION AS BAD AS POSSIBLE ABOUT DR.SAIJOU.
I'VE GOT IT.
THERE-FORE...

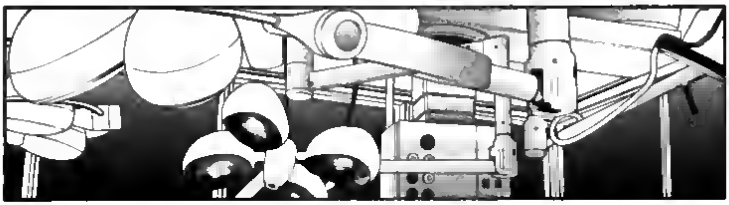
OR THAT HE BRAIN-WASHED YOUNG DOCTORS AND IS TRYING TO CONSTRUCT A FACTION THAT FAVORS HIM..
SOMETHING LIKE, SAIJOU TRULY HAS THE SKILL, BUT HE'S A MAN THAT VIOLATES AUTHORITIES AND BY THAT HAS DISRUPT THE ORGANIZATION'S ORDER...

I'VE GIVEN HIM THE IMPRESSION THAT DR. SAIJOU ISN'T WORTH THE "BEST DOCTOR" TITLE

51

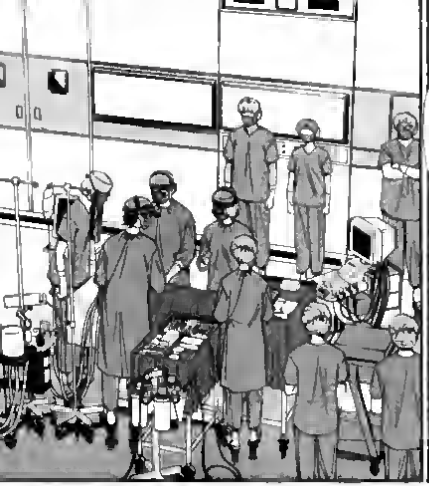
FUFUFU... THAT'S TRUE THANKS TO YOUR EFFORT.
BUT, THERE'S SOMETHING THAT INTRIGUED MY MIND ..


I'LL MAKE SOME TEA. WHY DON'T YOU JOIN ME AND RELAX?
.....
WELL, NO MATTER IF DR.SAIJOU'S OPERATION IS A SUCCESS OR NOT.
IT HAS NOTHING TO DO WITH US ANYMORE.



12

HMPH. YOU'RE RIGHT
WE'VE GOT TO FIND A TUMOR THAT'S NOT PICTURED IN CT SCAN NOR MRI HERE.
WHATEVER.
SERIOUSLY, WHAT'RE THEY PLOTTING NOW?



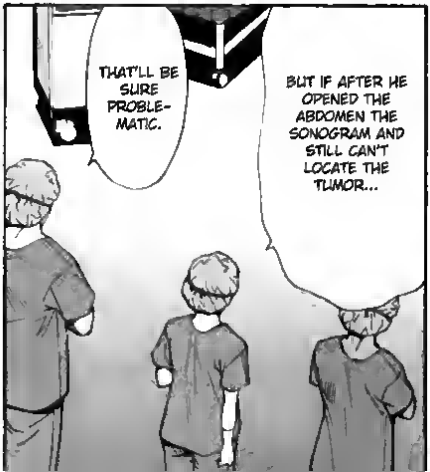
OKAY!
PATIENT IS IIDA YUUSHI-KUN, 8 YEARS OLD. WE'LL START DISSECTING HIS ABDOMEN

I HOPE SO.
I'M SURE HE'LL FIND THE TUMOR IN A BLINK OF EYE.

OF COURSE HE WILL.
WILL DR SAIJOU BE ALRIGHT?

13

YOU'RE THINKING THE SAME?


THAT'LL BE SURE PROBLE-MATIC.
BUT IF AFTER HE OPENED THE ABDOMEN THE SONOGRAM AND STILL CAN'T LOCATE THE TUMOR...

I'M JUST A CURIOUS OBSERVER.
HOHOHO... SORRY TO STARTLE YOU.
BUT WAIT, WHO ARE YOU?
DR.SAIJOU'S OPERATIONS' OBSERVERS USUALLY REVOLVE AROUND YOUNG ROOKIES, BUT TO TELL THE TRUTH AN OLD MAN LIKE YOU SHOULD HAVE COME AS WELL
OH? THAT'S A GOOD SPIRIT.
ALTHOUGH I'M TOO OLD FOR PATIENT CONSULTATION, I'M A BIT CURIOUS ABOUT HOW THE YOUNG GENIUS IS OPERATING.
14
blah
blah
THERE'S NO AGE LIMITATION OF BEING A DOCTOR, SO IT'S IMPORTANT TO KEEP LEARNING NO MATTER HOW OLD YOU'VE BECOME.
BUT JUST AS YOU SAID,
THAT'S PRETTY CRITICAL OF YOU.
DON'T KEEP CLINGING ON STUFF LIKE POWER OR AUTHORITIES.
OH! YOU DO UNDER-STAND, HUH~

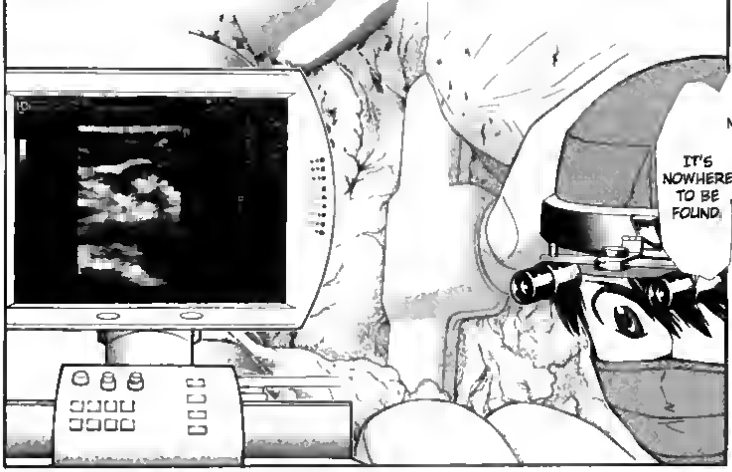
HEY, KYOKO ...
WHY ARE YOU TALKING SO MUCH TO SUCH A STRANGER?

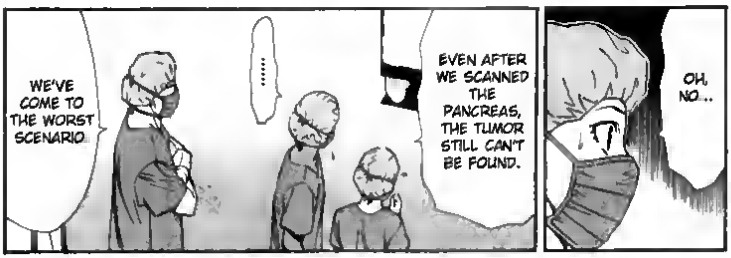
NG? WHAT'S UP?
H-HEY, KAEDE

.....
I'M SURE HE GOT LONELY FROM HAVING NO ONE TO TALK TO.
HE CAME TO OBSERVE THE OPERATION ALONE, MEANING HE'S GOT NOTHING TO DO...

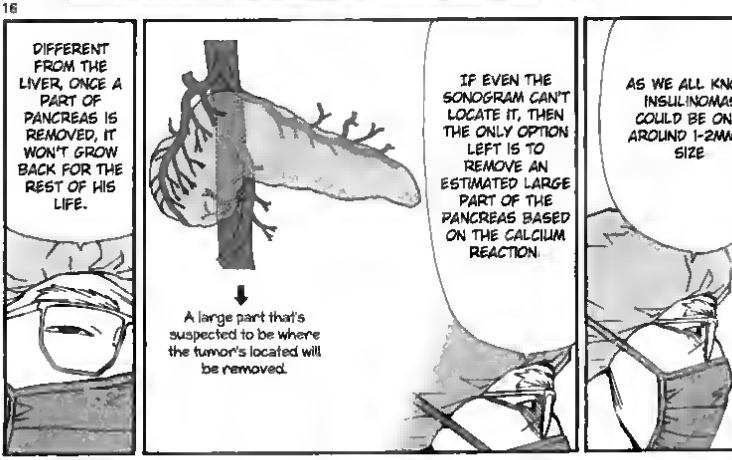
HOW'S IT, MIKOTO? I'M LOOKING AT THE SONOGRAM DISPLAY AS WELL, BUT...
YEAH, SAME GOES TO ME.

WE-WELL ... YOU'VE GOT A POINT THERE, BUT...
DON'T YOU FEEL PITY FOR HIM IF YOU IGNORE HIM AS WELL?

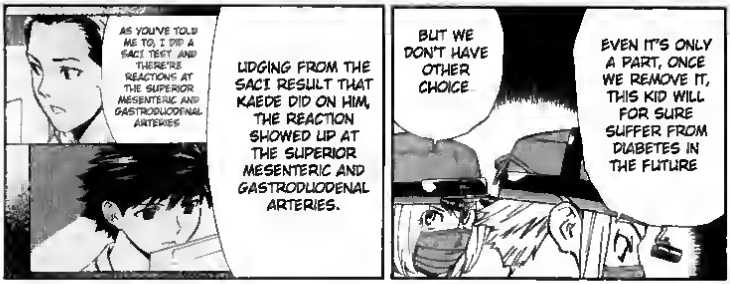

NONE.
IT'S NOWHERE TO BE FOUND.

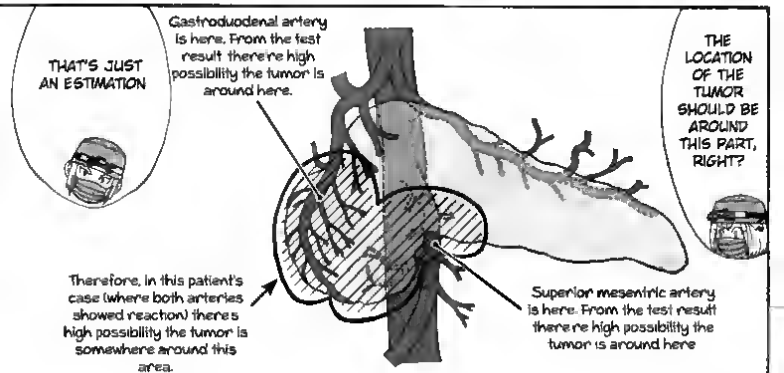

WE'VE COME TO THE WORST SCENARIO.
.....
EVEN AFTER WE SCANNED THE PANCREAS, THE TUMOR STILL CAN'T BE FOUND.
OH, NO...

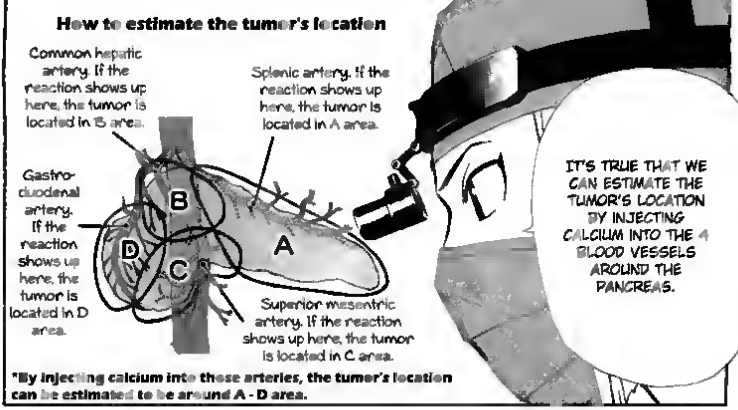
16


DIFFERENT FROM THE LIVER, ONCE A PART OF PANCREAS IS REMOVED, IT WON'T GROW BACK FOR THE REST OF HIS LIFE.
A large part that's suspected to be where the tumor's located will be removed.
IF EVEN THE SONOGRAM CAN'T LOCATE IT, THEN THE ONLY OPTION LEFT IS TO REMOVE AN ESTIMATED LARGE PART OF THE PANCREAS BASED ON THE CALCIUM REACTION.
AS WE ALL KNOW, INSULINOMAS COULD BE ONLY AROUND 1-2MM IN SIZE.

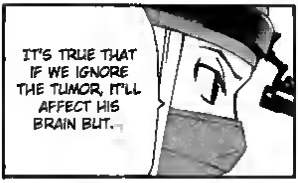
DON'T SAY IT SO EASILY.
SINCE THERE'S NO OTHER WAY, SHOULD WE CUT IT OFF?
THIS IS A TOUGH DECISION.

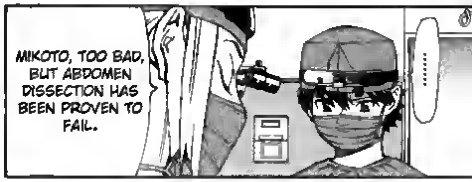

AS YOU'VE TOLD ME TO, I DID A SACI TEST AND THERE'RE REACTIONS AT THE SUPERIOR MESENTERIC AND GASTRODUODENAL ARTERIES
JUDGING FROM THE SACI RESULT THAT KAEDE DID ON HIM, THE REACTION SHOWED UP AT THE SUPERIOR MESENTERIC AND GASTRODUODENAL ARTERIES.
BUT WE DON'T HAVE OTHER CHOICE
EVEN IT'S ONLY A PART, ONCE WE REMOVE IT, THIS KID WILL FOR SURE SUFFER FROM DIABETES IN THE FUTURE


THAT'S JUST AN ESTIMATION
Gastroduodenal artery is here. From the test result there're high possibility the tumor is around here.
THE LOCATION OF THE TUMOR SHOULD BE AROUND THIS PART, RIGHT?
Therefore, in this patient's case (where both arteries showed reaction) there's high possibility the tumor is somewhere around this area.
Superior mesenteric artery is here. From the test result there're high possibility the tumor is around here


How to estimate the tumor's location
Common hepatic artery. If the reaction shows up here, the tumor is located in B area.
Splenic artery. If the reaction shows up here, the tumor is located in A area.
Gastro-duodenal artery. If the reaction shows up here, the tumor is located in D area.
B
A
D
C
Superior mesentric artery. If the reaction shows up here, the tumor is located in C area.
*By injecting calcium into these arteries, the tumor's location can be estimated to be around A - D area.
IT'S TRUE THAT WE CAN ESTIMATE THE TUMOR'S LOCATION BY INJECTING CALCIUM INTO THE 4 BLOOD VESSELS AROUND THE PANCREAS.

TO TOP IT, PANCREAS IS A COMPLEX ORGAN. THERE'S NO GUARANTEE THE TUMOR TO BE IN THOSE AREA.
BUT IF WE'RE CUTTING THIS KID'S PANCREAS ACCORDING TO THAT, IT'LL BE AROUND C-D.. THAT'S QUITE A WIDE AREA WE'LL HAVE TO RESECT...


IT'S TRUE THAT IF WE IGNORE THE TUMOR, IT'LL AFFECT HIS BRAIN BUT..


MIKOTO, TOO BAD, BUT ABDOMEN DISSECTION HAS BEEN PROVEN TO FAIL.
.....

IF WE'RE TO CUT IT BLINDLY, I'M STEPPING DOWN FROM THIS.

THE BEST SKILLED SURGEON

最上の医師

SEND YOUR APPLICATION TO BCSCANS@GMAIL.COM OR VISIT OUR WEBSITE BLASTCOMICSCANS.WORDPRESS.COM FOR MORE INFORMATION!

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO
WHITENINJA

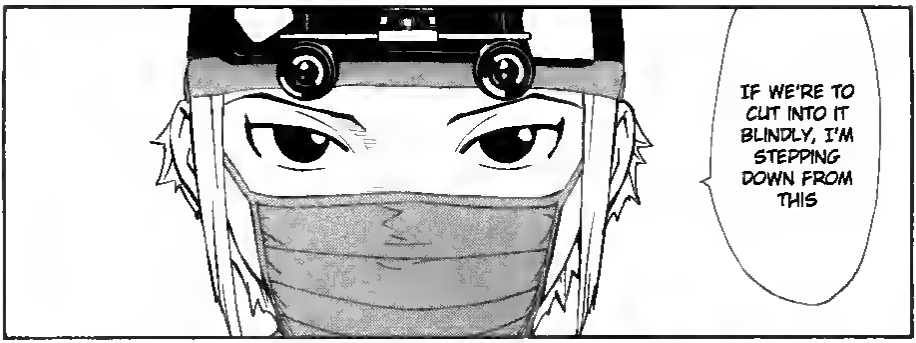
CLEANER
FIRSTBLOOD116

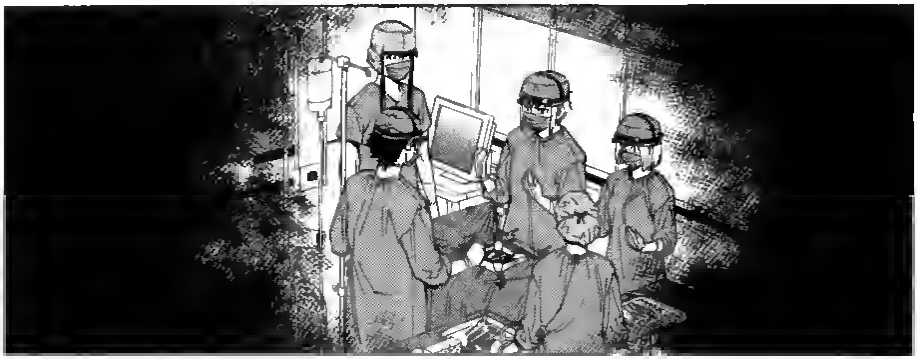
RE-DRAWER
DJIDANEZOKAWA

DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

CHAPTER 40:
THE EYES THAT SEE THROUGH THE TRUTH


IF WE'RE TO CUT INTO IT BLINDLY, I'M STEPPING DOWN FROM THIS

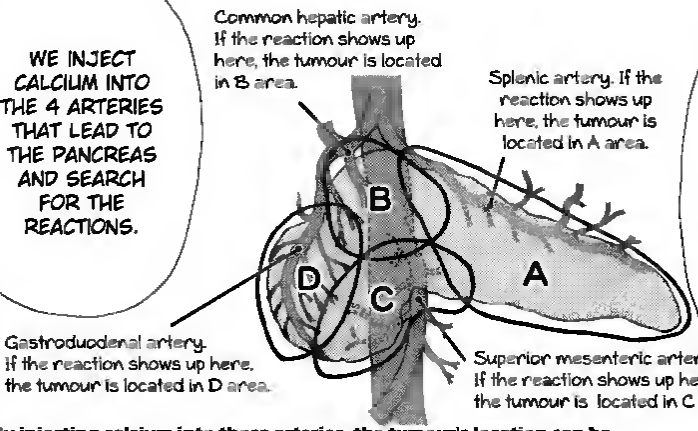


HE'S CALLED DR.AYAME, ISN'T HE? WHAT HE SAID IS THE WHOLE TRUTH.

2

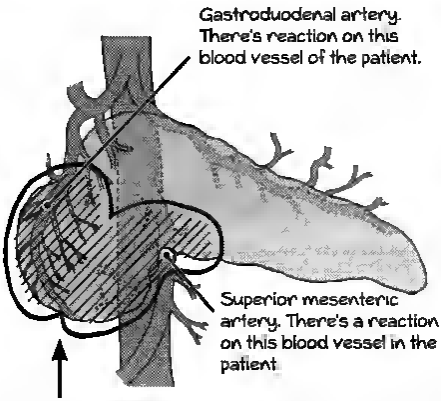
How to estimate insulinoma's location

WE INJECT CALCIUM INTO THE 4 ARTERIES THAT LEAD TO THE PANCREAS AND SEARCH FOR THE REACTIONS.


Common hepatic artery. If the reaction shows up here, the tumour is located in B area.
Splenic artery. If the reaction shows up here, the tumour is located in A area.
B
A
D
C
Gastroduodenal artery. If the reaction shows up here, the tumour is located in D area.
Superior mesenteric artery. If the reaction shows up here, the tumour is located in C area.

JUST AS YOU'VE KNOWN, NORMALLY TO KNOW WHETHER OR NOT THERE'S INSULINOMA ON THE PANCREAS,

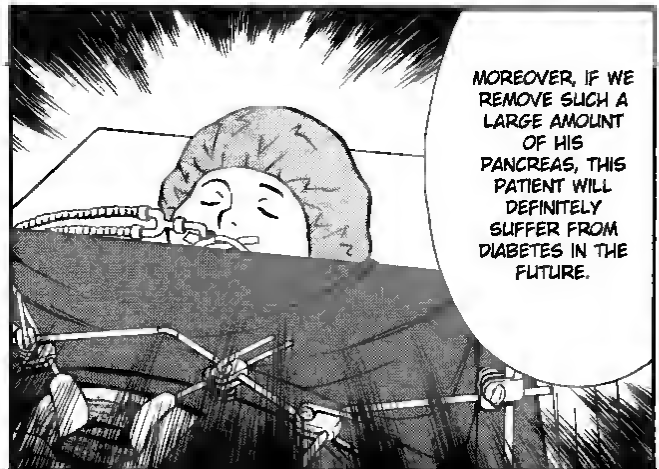
***By injecting calcium into those arteries, the tumour's location can be estimated to be around A - D area.**


Gastroduodenal artery. There's reaction on this blood vessel of the patient.
Superior mesenteric artery. There's a reaction on this blood vessel in the patient.

Therefore, in this patient's case, where both blood vessels showed reactions, there are high possibilities that the tumour is located around this area.

MEANING, AS SHOWN IN THE PICTURE, IF WE REMOVE THE LOWER HALF OF THE PANCREAS, WE COULD SAY WE'VE REMOVED THE TUMOUR AS WELL, BUT THAT'S WHERE THE COMPLEXITY OF THE PANCREAS LIES.

IN THIS PATIENT'S CASE, THE REACTION SHOWED UP AT THE SUPERIOR MESENTERIC AND GASTRODUODENAL ARTERIES.



MOREOVER, IF WE REMOVE SUCH A LARGE AMOUNT OF HIS PANCREAS, THIS PATIENT WILL DEFINITELY SUFFER FROM DIABETES IN THE FUTURE.

DUE TO THE COMPLEX BLOOD VESSELS' CONSTRUCTION IN THE PANCREAS, THERE ARE NO GUARANTEE IF WE REMOVE THAT PART THEN THE TUMOUR IS REMOVED AS WELL...

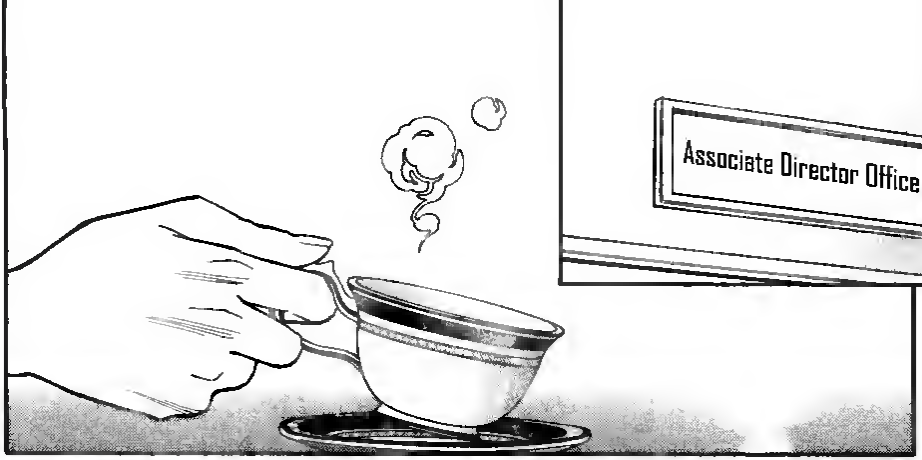
YOU'RE NOT TO BLAME.
IF ONLY I COULD FIND THE TUMOUR IN THE CT OR MRI SCAN...
UKH.
RATHER THAN TAKING A RISKY BET, IT'S WISER TO GIVE IT UP.
YEAH.
IT'S NOWHERE TO BE FOUND!
IN FACT, EVEN AFTER THAT YOUNG GENIUS SCANNED IT WITH THE SONOGRAM, IT STILL COULDN'T BE FOUND.
SINCE MOST INSULINOMAS ARE SMALLER THAN 2MM, THERE ARE TIMES WHEN IT CAN'T BE FOUND NO MATTER WHO'S LOOKING AT IT.
HE'S TRYING HIS BEST TO LOOK FOR ANY SLIGHTEST POSSIBILITY LEFT.
?
MORE-OVER,
B-BUT ...
FROM WHAT I SEE, THAT YOUNG GENIUS HAS NOT COMPLETELY GIVEN UP YET.

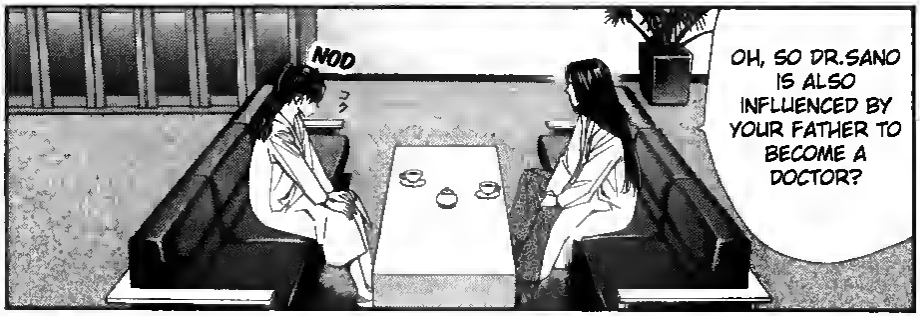
I WOULD RATHER HAVE HIM GET DIABETES THAN HAVE HIS BRAIN'S DEVELOPMENT OBSTRUCTED BECAUSE OF THE TUMOUR.
THAT'S JUST YOUR EGO. TO TELL YOU THE TRUTH, IF THIS TUMOUR IS REMOVABLE, I WOULDN'T STEP DOWN AS WELL.
BUT AA-KUN, IF WE GIVE UP HERE AS YOU'VE SAID, THE INSULINOMA WILL BE LEFT SOMEWHERE IN HIM.
WHAT I AM AFRAID OF IS HAVING TO END UP LETTING HIM SUFFER FROM BOTH DIABETES AND OBSTRUCTED BRAIN DEVELOPMENT.

5

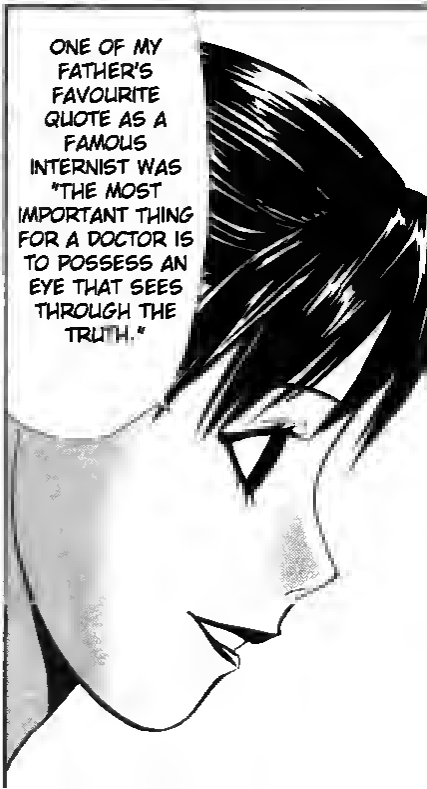
EVEN IF I STEPPED DOWN FROM THIS SURGERY, THE TWO OF YOU ARE MORE THAN ENOUGH TO SIMPLY REMOVE HALF OF A PANCREAS.
FOR-GET IT.
... UHMNNN, BUT...
WHATEVER THE DECISION IS, IT'S UP TO THE SURGEON TO DECIDE.

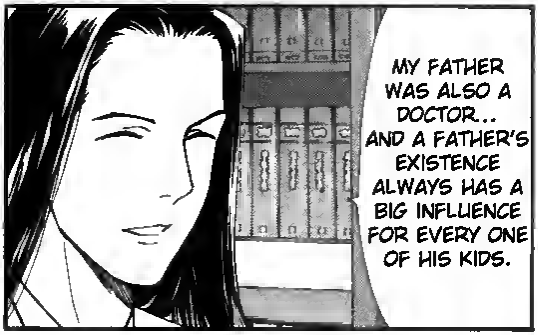
!?
THEN, LET'S GO AROUND.
I'LL SAY THIS SINCE BOTH FRONT AND BACK ARE HELL, IT'S BETTER TO RETREAT FOR NOW.
I SAID LET'S GO AROUND.
W-WHAT DID YOU SAY?
TO FIND HIS OTHER PANCREAS.
I'M NOT GOING FORWARD, NOR BACK-WARDS.
I'M ONLY TAKING A LITTLE DETOUR.

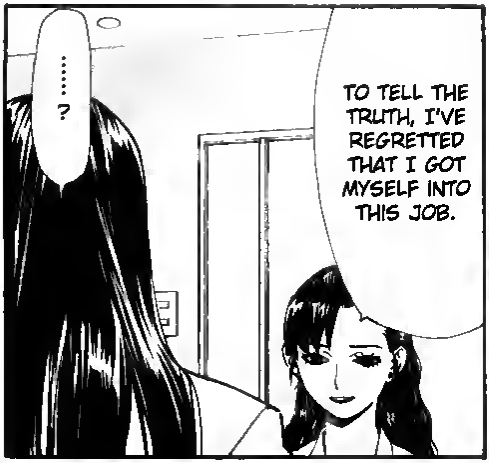

Associate Director Office

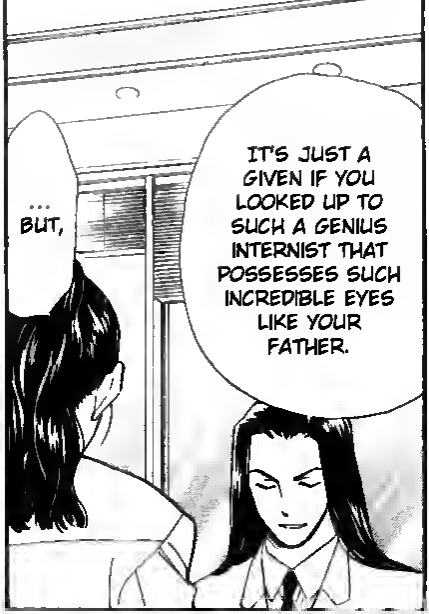

NOD
OH, SO DR.SANO IS ALSO INFLUENCED BY YOUR FATHER TO BECOME A DOCTOR?

I UNDER-STAND THAT FEELING VERY WELL.
I LOOKED UP TO THOSE EYES THAT HAVE SOLVED MANY CASES INSTANTLY...

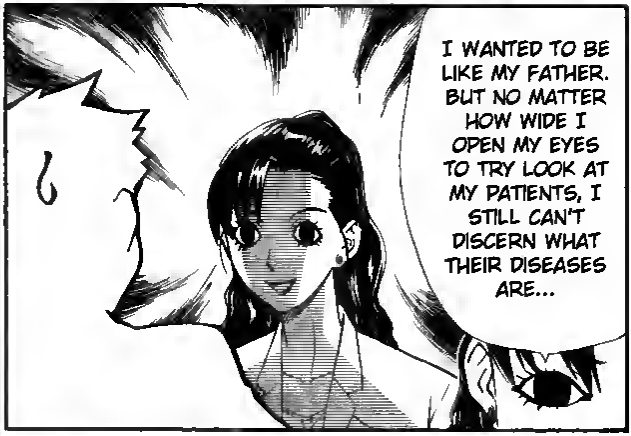

ONE OF MY FATHER'S FAVOURITE QUOTE AS A FAMOUS INTERNIST WAS "THE MOST IMPORTANT THING FOR A DOCTOR IS TO POSSESS AN EYE THAT SEES THROUGH THE TRUTH."

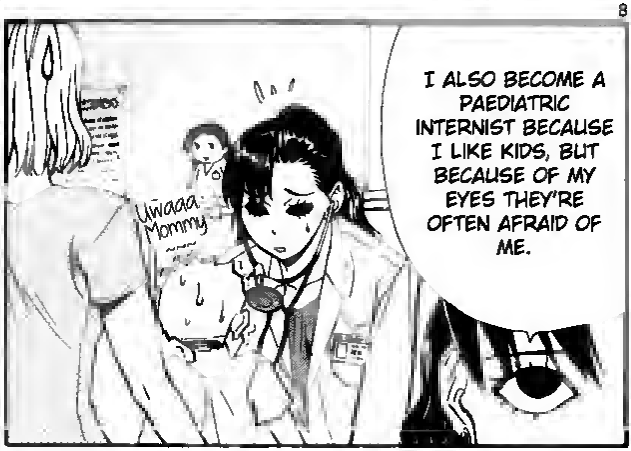

MY FATHER WAS ALSO A DOCTOR.. AND A FATHER'S EXISTENCE ALWAYS HAS A BIG INFLUENCE FOR EVERY ONE OF HIS KIDS.

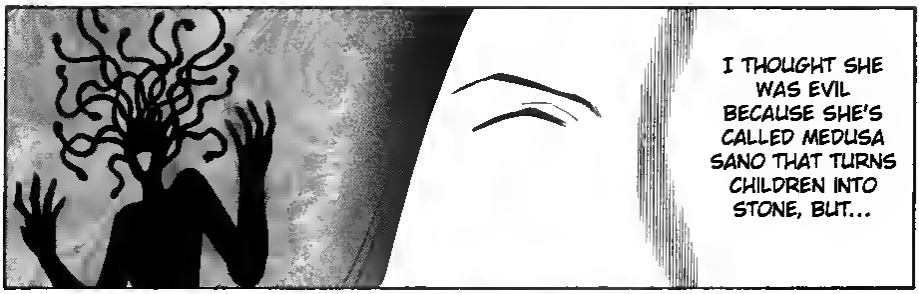

TO TELL THE TRUTH, I'VE REGRETTED THAT I GOT MYSELF INTO THIS JOB.
……?

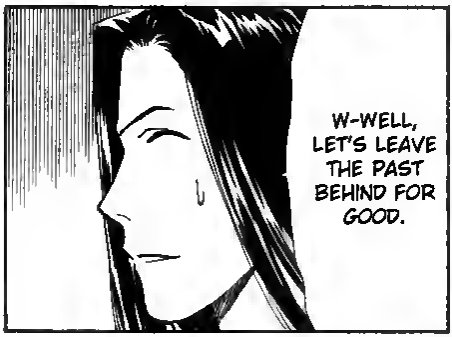

IT'S JUST A GIVEN IF YOU LOOKED UP TO SUCH A GENIUS INTERNIST THAT POSSESSES SUCH INCREDIBLE EYES LIKE YOUR FATHER.
…BUT,

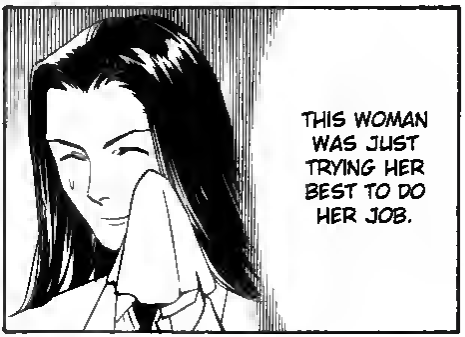
EVEN MY OWN SUBORDINATES DON'T FEEL THAT I'M RELIABLE… IN THE END, I WAS OVERTAKEN BY DR.SAIJOU…
I SEE….
……

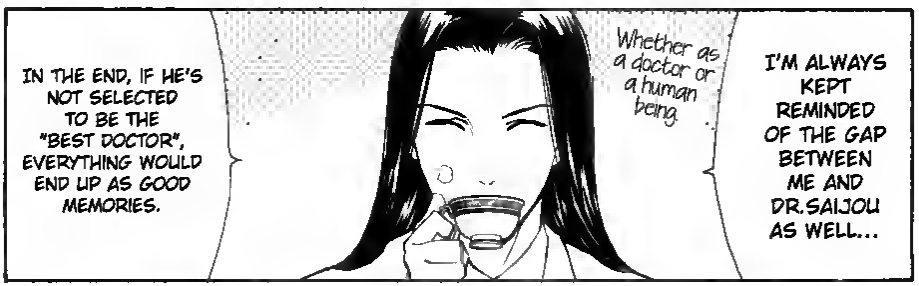

I WANTED TO BE LIKE MY FATHER. BUT NO MATTER HOW WIDE I OPEN MY EYES TO TRY LOOK AT MY PATIENTS, I STILL CAN'T DISCERN WHAT THEIR DISEASES ARE…


I ALSO BECOME A PAEDIATRIC INTERNIST BECAUSE I LIKE KIDS, BUT BECAUSE OF MY EYES THEY'RE OFTEN AFRAID OF ME.
Waaaa Mommy ~~~

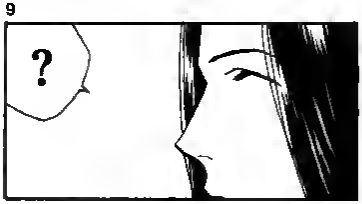

I THOUGHT SHE WAS EVIL BECAUSE SHE'S CALLED MEDUSA SANO THAT TURNS CHILDREN INTO STONE, BUT...


W-WELL, LET'S LEAVE THE PAST BEHIND FOR GOOD.

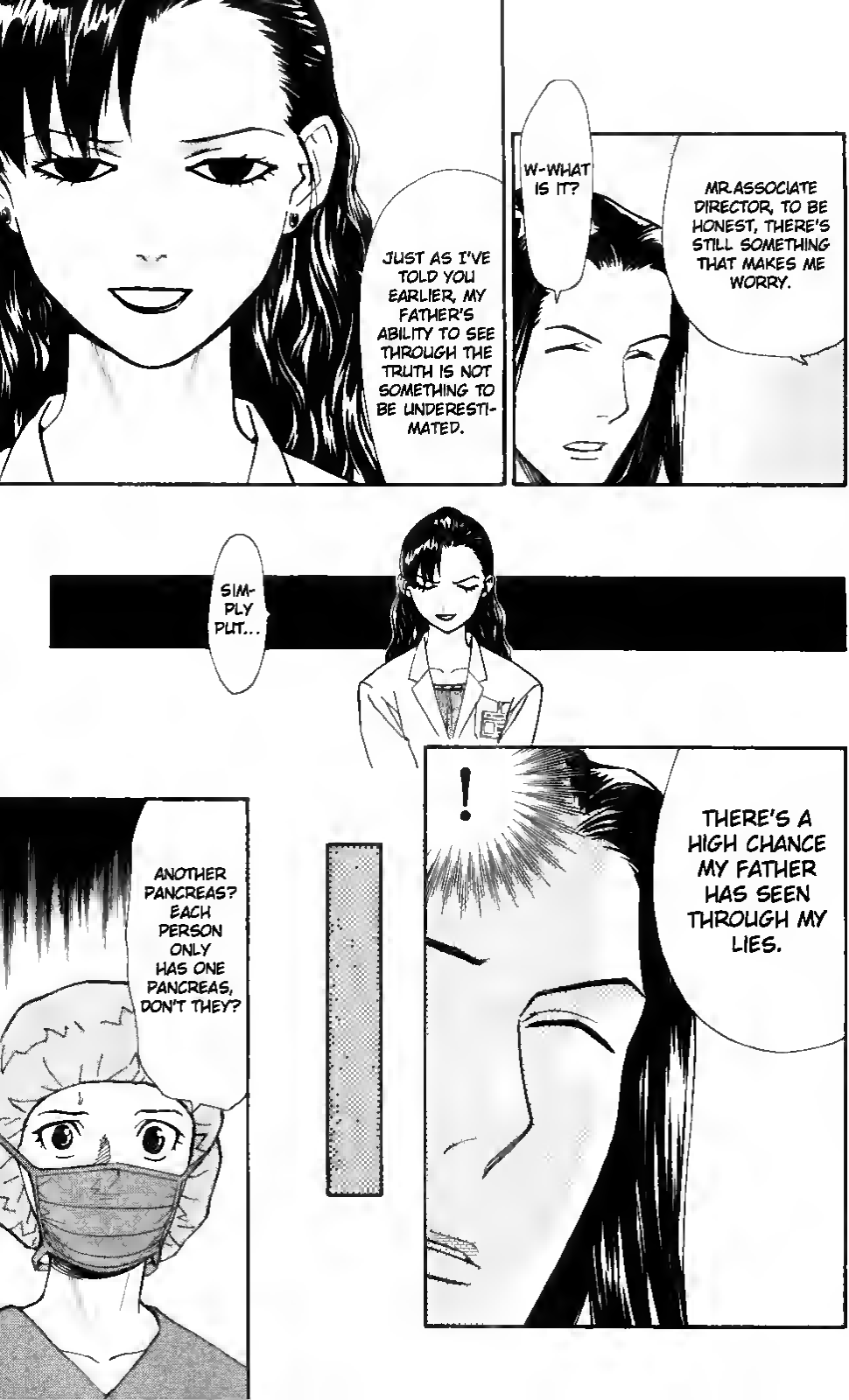

THIS WOMAN WAS JUST TRYING HER BEST TO DO HER JOB.

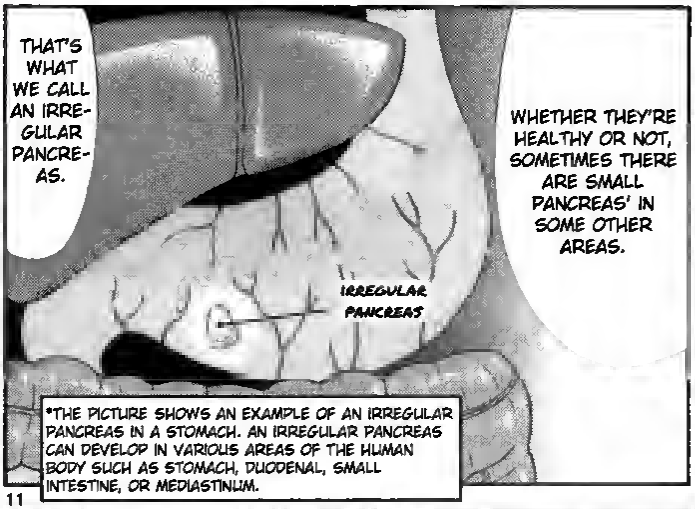

IN THE END, IF HE'S NOT SELECTED TO BE THE "BEST DOCTOR", EVERYTHING WOULD END UP AS GOOD MEMORIES.
Whether as a doctor or a human being...
I'M ALWAYS KEPT REMINDED OF THE GAP BETWEEN ME AND DR.SAIJOU AS WELL...

I HOPE SO...

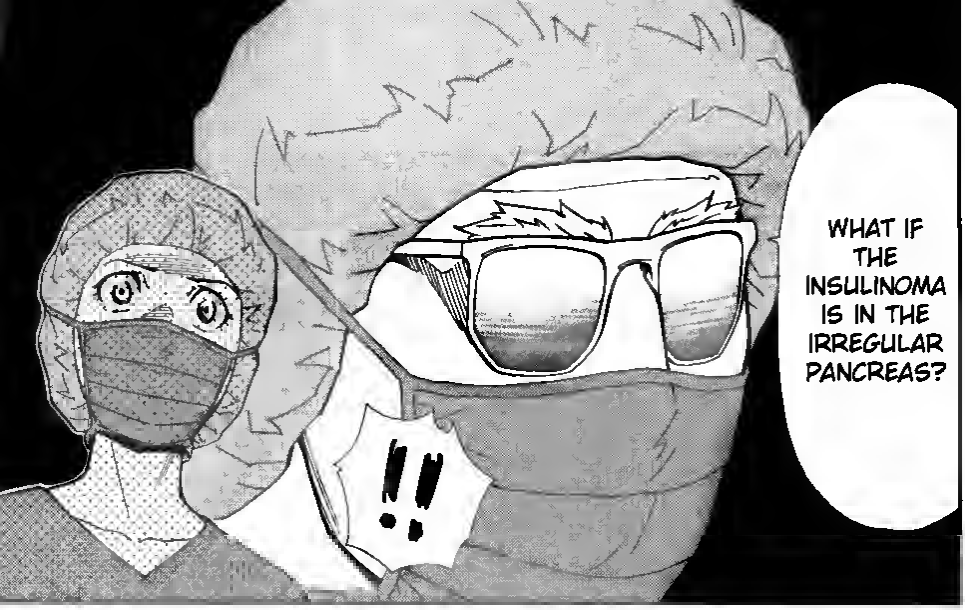

?

.....
THANKS TO YOU, I'LL BE ABLE TO BREAK FREE FROM MY INFERIOR COMPLEX TOWARDS DR.SAIJOU.


JUST AS I'VE TOLD YOU EARLIER, MY FATHER'S ABILITY TO SEE THROUGH THE TRUTH IS NOT SOMETHING TO BE UNDERESTIMATED.
W-WHAT IS IT?
MR. ASSOCIATE DIRECTOR, TO BE HONEST, THERE'S STILL SOMETHING THAT MAKES ME WORRY.
SIMPLY PUT...
!
THERE'S A HIGH CHANCE MY FATHER HAS SEEN THROUGH MY LIES.
ANOTHER PANCREAS? EACH PERSON ONLY HAS ONE PANCREAS, DON'T THEY?


THAT'S WHAT WE CALL AN IRRE-GULAR PANCRE-AS.
IRREGULAR PANCREAS
WHETHER THEY'RE HEALTHY OR NOT, SOMETIMES THERE ARE SMALL PANCREAS' IN SOME OTHER AREAS.

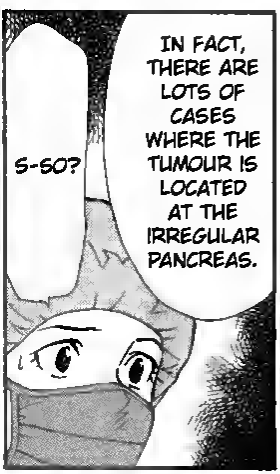
*THE PICTURE SHOWS AN EXAMPLE OF AN IRREGULAR PANCREAS IN A STOMACH. AN IRREGULAR PANCREAS CAN DEVELOP IN VARIOUS AREAS OF THE HUMAN BODY SUCH AS STOMACH, DUODENAL, SMALL INTESTINE, OR MEDIASTINUM.

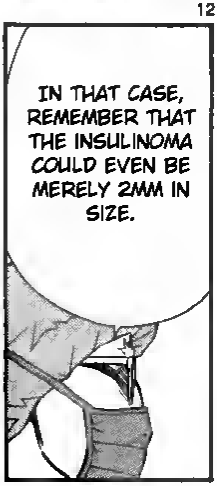

WHAT IF THE INSULINOMA IS IN THE IRREGULAR PANCREAS?
!!

FUFUFU, THAT'S TRUE BUT...
BECAUSE YOU SEE, EVEN IF THOSE IRREGULAR PANCREAS DO EXIST, THEY'D BE JUST AROUND 5MM IN SIZE, RIGHT?

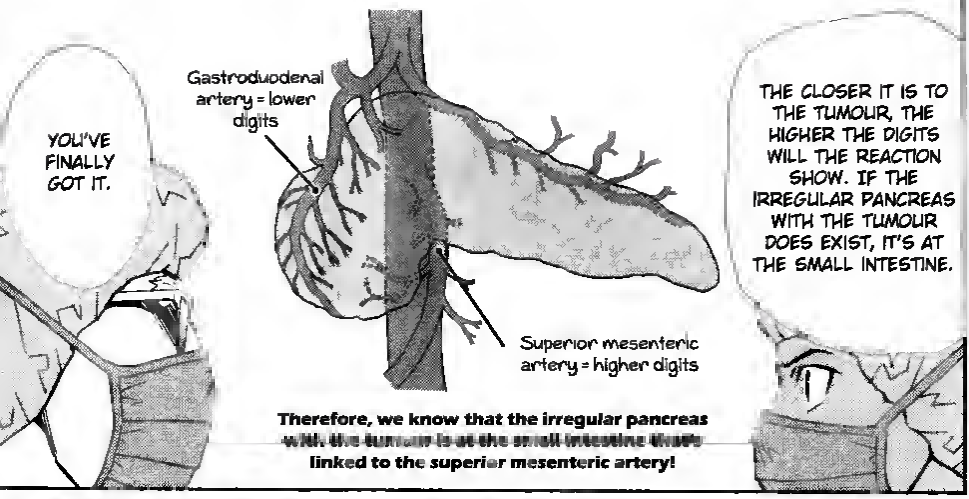
IS THAT EVEN POSSI-BLE?

THEN, DR.SAIJOU MEANT TO FIND THAT WHEN HE SAID TAKING A WAY AROUND...
B-BUT, OLD MAN...
YEP.

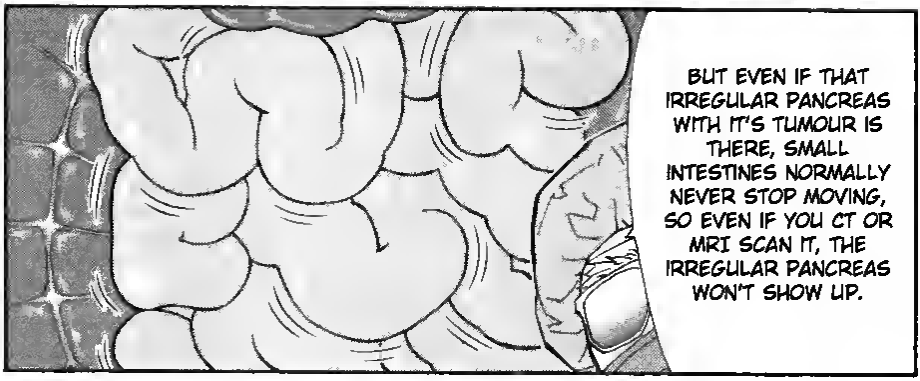

S-SO?
IN FACT, THERE ARE LOTS OF CASES WHERE THE TUMOUR IS LOCATED AT THE IRREGULAR PANCREAS.


IN THAT CASE, REMEMBER THAT THE INSULINOMA COULD EVEN BE MERELY 2MM IN SIZE.

DIDN'T THE SUPERIOR MESENTERIC AND GASTRODUODENAL ARTERIES SHOW REACTIONS IN YOUR SACI TEST?
THERE IS A HINT.
A HUMAN'S BODY IS FRIGGIN WIDE. HOW ARE THEY SUPPOSED TO FIND SUCH A SMALL IRREGULAR PANCREAS WITHOUT A SINGLE HINT...
BUT, EVEN WITH THAT ...
THE SUPERIOR MESEN-TERIC ARTERIES ARE A FEW TIMES HIGHER.
WHICH DIGITS WERE HIGHER?
13
Gastroduodenal artery. Linked to the stomach and duodenal
Superior mesenteric artery. Linked to the small intestine
THE ONES THAT ARE LINKED TO THOSE 2 VESSELS ARE THE STOMACH, DUODENAL AND SMALL INTESTINE...
I SEE!


YOU'VE FINALLY GOT IT.
Gastroduodenal artery = lower digits
Superior mesenteric artery = higher digits
THE CLOSER IT IS TO THE TUMOUR, THE HIGHER THE DIGITS WILL THE REACTION SHOW. IF THE IRREGULAR PANCREAS WITH THE TUMOUR DOES EXIST, IT'S AT THE SMALL INTESTINE.

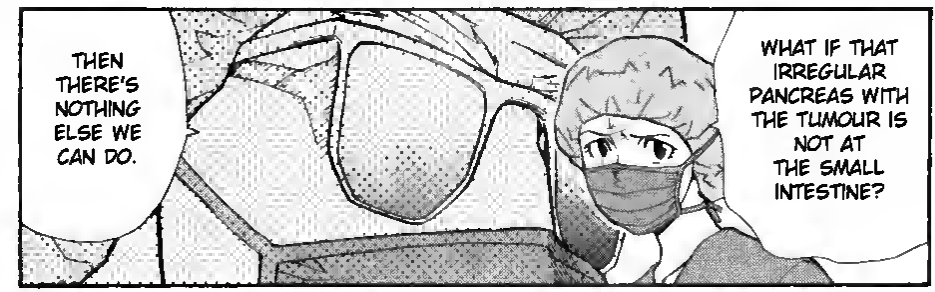
Therefore, we know that the irregular pancreas with the tumour is at the small intestine that's linked to the superior mesenteric artery!


BUT EVEN IF THAT IRREGULAR PANCREAS WITH IT'S TUMOUR IS THERE, SMALL INTESTINES NORMALLY NEVER STOP MOVING, SO EVEN IF YOU CT OR MRI SCAN IT, THE IRREGULAR PANCREAS WON'T SHOW UP.

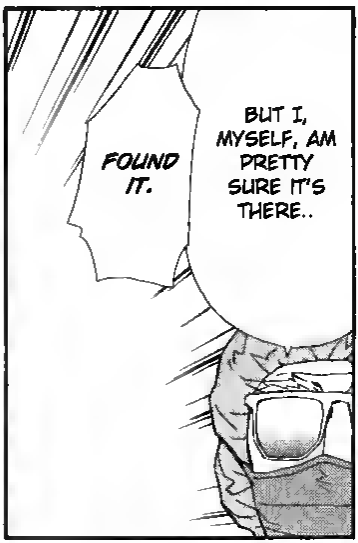
14

IF THE SONOGRAM CAN'T LOCATE THE TUMOUR, SEARCH FOR THE IRREGULAR PANCREAS.
PROBABLY, THAT YOUNG GENIUS DECIDED TO DISSECT THE PATIENT'S ABDOMEN AFTER CONSIDERING ALL THOSE.

I ADMIT THAT'S AWESOME, BUT...
.....
C-... COOL.
NOT BY TAKING A RISKY BET AND REMOVE PART OF THE PANCREAS.


THEN THERE'S NOTHING ELSE WE CAN DO.
WHAT IF THAT IRREGULAR PANCREAS WITH THE TUMOUR IS NOT AT THE SMALL INTESTINE?

15


FOUND IT.
BUT I, MYSELF, AM PRETTY SURE IT'S THERE..

IT'S HERE!
OOOOHHH!

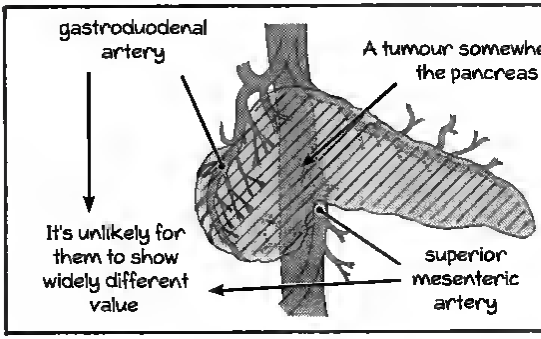
YOU DID IT, MIKOTO!
COOLL !!!

...YOU WERE RIGHT.
I want! I want!
But I don't think this can count as a training though!
DO YOU WANT TO TRY REMOVING IT, NATSUME?

YEAH.
NOW THAT WE'VE FOUND IT, REMOVING IT IS A PIECE OF CAKE.

I CONFIRMED IT AFTER KAEDE-KUN TOLD ME THE SUPERIOR MESENTERIC'S DIGITS ARE A FEW TIMES HIGHER THAN GASTRODUODENAL'S.

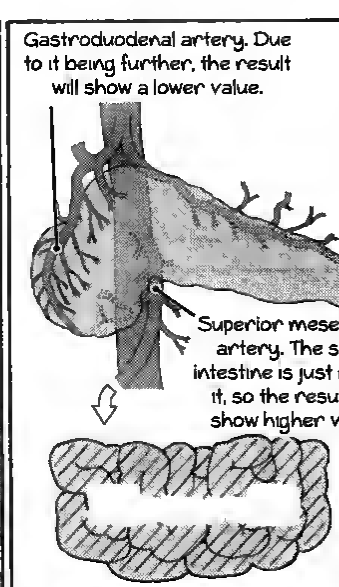
BUT, HOW DID YOU KNOW?


gastroduodenal artery
A tumour somewhere in the pancreas
It's unlikely for them to show widely different value
superior mesenteric artery

IF THE TUMOUR IS LOCATED AT THAT VERY PANCREAS, IT'S UNLIKELY THAT THE VALUE SHOWN WILL HAVE SUCH A GAP OF DIFFERENCE.

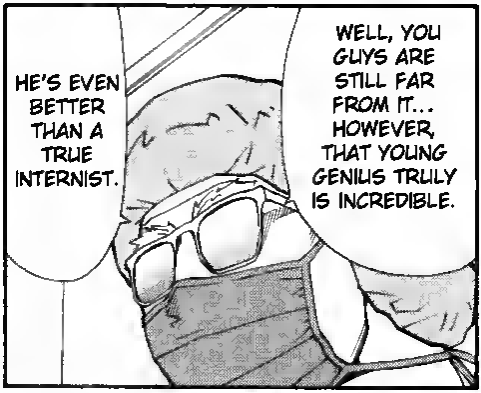
I-I SEE!

I BET THAT YOUNG GENIUS ALSO THOUGHT THE SAME AFTER LOOKING AT THE SACI TEST RESULT.


Gastroduodenal artery. Due to it being further, the result will show a lower value.
Superior mesenteric artery. The small intestine is just next to it, so the result will show higher value.

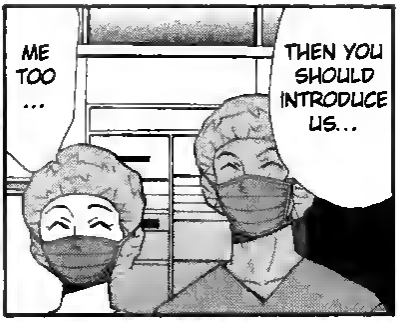
IN CASE THE TUMOUR IS AT THE SMALL INTESTINE, DUE TO IT BEING CLOSER, THE SUPERIOR MESENTERIC ARTERY WILL SHOW A MUCH HIGHER DIGIT VALUE.

SFX: HAHAHA



SFX: SCRATCH SCRATCH

.....
REALIZATION HITS
.....


ME TOO ...
THEN YOU SHOULD INTRODUCE US...

PANIC
WAIT, THAT MEANS YOU ARE...

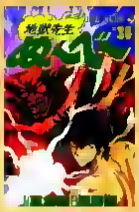
HA
HA
HA
THE PRESIDENT OF JAPAN MEDICAL ASSOCIATION,
DR. SANO NORIAKI?!

SEND YOUR APPLICATION TO BCSCANS@GMAIL.COM OR VISIT OUR WEBSITE BLASTCOMICSCANS.WORDPRESS.COM FOR MORE INFORMATION!

BLAST Comic

NEEDS YOUR HELP!!

Cleaner + Typesetter



Typesetter

Typesetter

Another, we're also searching for someone who can provide us the raw for Tanaka-kun wa Itsumo Kedaruge.

Send us an e-mail to bcscans@gmail.com
or visit our website at
https://blastcomicscans.wordpress.com/

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO
WHITENINJA

CLEANER
FIRSTBLOOD116

RE-DRAWER
DJIDANEZOKAWA

DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

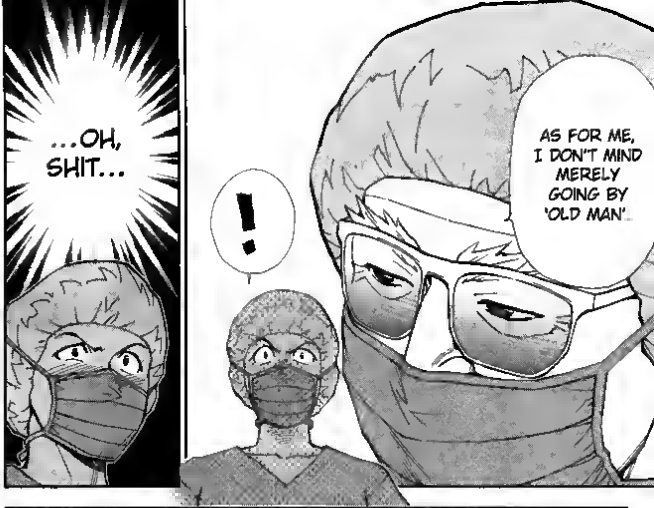
VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

THEN, COULD YOU BE...
CHAPTER 413

DEMON EXTERMINATION
THE PRESIDENT OF JAPAN MEDICAL ASSOCIATION ...
DR.SANO NORIAKI?
HA HA HA

BUT, HUMANS SHOULDN'T CLING TOO MUCH ONTO THEIR TITLES.

WELL, I DO HAVE SUCH A TITLE.


...OH, SHIT...
!
AS FOR ME, I DON'T MIND MERELY GOING BY 'OLD MAN'.

THIS OLD MAN STRANGELY FELT SO COOL.

2

THERE YOU GO, KYOKO.
KAEDE-KUN MIGHT LACK SOME MANNERS, BUT HE POSSESSES A GOOD SPIRIT.

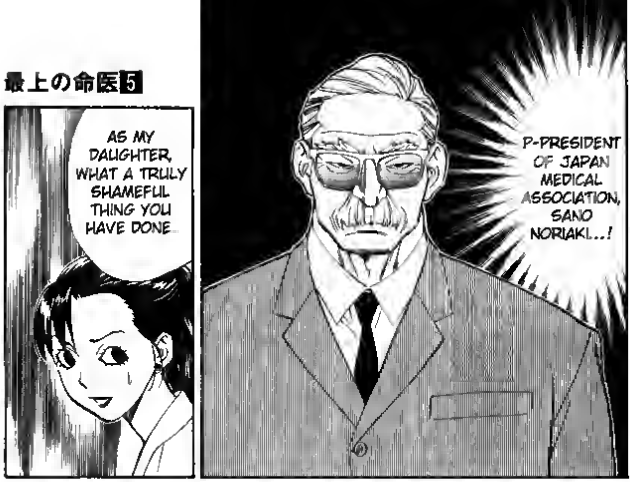
OLD MAN, YOU ROCK!
HEY, KAEDE! YOU'RE BEING IMPOLITE.
HAHAHA, DIDN'T I TELL YOU I DON'T MIND?

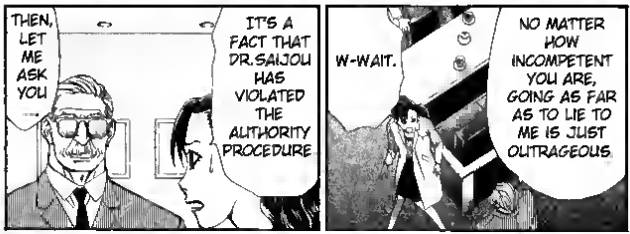
OF COURSE, I'LL VISIT HIM.
BUT FROM WHAT I HEARD, DIDN'T YOU COME TO VISIT CHAIRMAN TAIRA?
WE UNDER-STAND EACH OTHER.
BUT BEFORE THAT...
3
I'M GOING OUT A BIT TO EXTERMINATE A DEMON.
Y-YOU'RE KIDDING ...

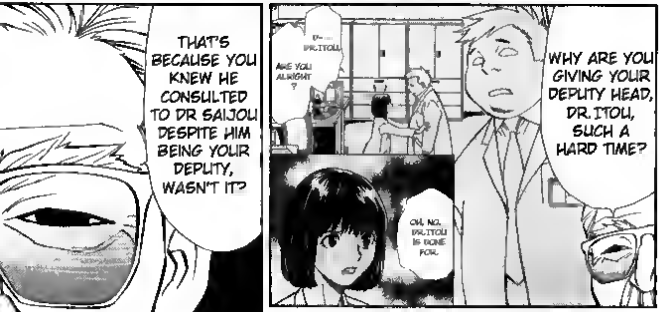
I'M NOT A HUNDRED PERCENT SURE ANYWAY...
WHAT WOULD YOU DO IF I DID?
WHY DIDN'T YOU TELL ME BEFORE THAT YOUR FATHER MIGHT HAVE SEEN THROUGH YOUR LIES?!

B-BUT, IT'D BETTER FOR US TO AT LEAST NOT BE SEEN TOGETHER.
UKH
AND SINCE I'VE ALREADY SAID IT TO HIM, THERE'S NO MORE TURNING BACK

FA—. FATHER!
I'VE ALWAYS KNOWN WHAT YOU'VE BEEN TRYING TO DO SINCE THE BEGINNING
THERE'S NO NEED FOR EXPLANA-TIONS
IF WE'RE TO BE FOUND OUT LIKE THIS, THERE'D BE NOTHING WE CAN EXPLAIN

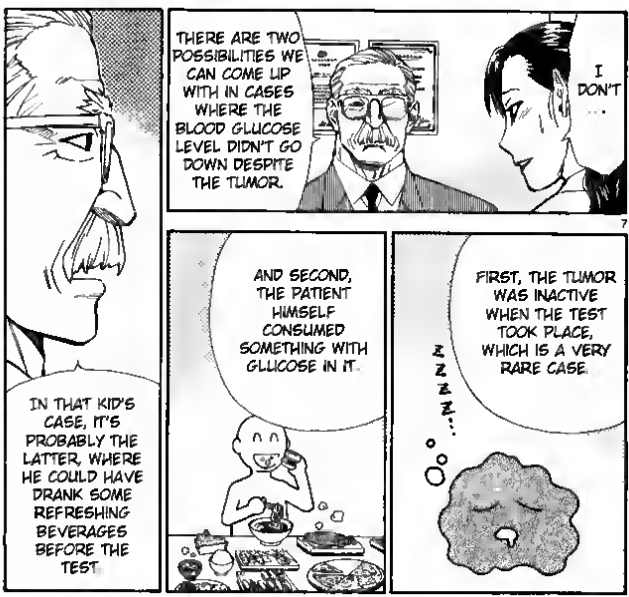

AS MY DAUGHTER, WHAT A TRULY SHAMEFUL THING YOU HAVE DONE
P-PRESIDENT OF JAPAN MEDICAL ASSOCIATION, SANO NORIAKI...!


THEN, LET ME ASK YOU
IT'S A FACT THAT DR.SAIJOU HAS VIOLATED THE AUTHORITY PROCEDURE
W-WAIT.
NO MATTER HOW INCOMPETENT YOU ARE, GOING AS FAR AS TO LIE TO ME IS JUST OUTRAGEOUS


THAT'S BECAUSE YOU KNEW HE CONSULTED TO DR SAIJOU DESPITE HIM BEING YOUR DEPUTY, WASN'T IT?
DR.ITOU!
ARE YOU ALRIGHT?
OH, NO, DR.ITOU IS FINE FOR.
WHY ARE YOU GIVING YOUR DEPUTY HEAD, DR.ITOU, SUCH A HARD TIME?

NORMALLY, WHEN THERE ARE UNSOLVED MEDICAL CASES, THE APPROPRIATE COURSE TO TAKE IS TO TRANSFER IT TO THE SPECIALIST IN THE UNIVERSITY HOSPITALS.
H-HOW COULD HE HAVE KNOWN SO MUCH...?
!
AM I RIGHT?
BUT YOU IGNORED THAT TO PROTECT YOUR OWN PRIDE.
UKH ...
IT'S ONLY A GIVEN IF YOUR SUBORDINATES STEP OVER YOU AND CONSULT OTHERS.
THEN YOU NEED TO IDENTIFY YOUR OWN ABILITY FIRST.
I JUST... WANTED TO BE LIKE YOU, WHO CAN IDENTIFY ANY DISEASE...
I'M SORRY...

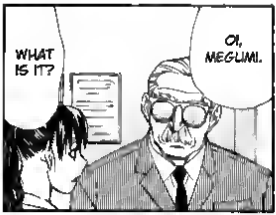
FOR EXAMPLE, HOW DID THE PATIENT WITH INSULINOMA HAVE A NORMAL BLOOD GLUCOSE LEVEL?
I THINK THERE'S A TUMOR DEVELOPED AT HIS PANCREAS, OR "INSULINOMA."
HIS BLOOD GLUCOSE LEVEL IS NORMAL, BUT FOR SOME REASON HE GETS THROWN RUNNING CLASS...
HAHH
IT'S AN UNKNOWN CASE. ANYWAYS, THE BLOOD GLUCOSE TEST RESULT WAS ALSO NORMAL, SO YOU DON'T USUALLY COME UP WITH IT BUT IT'S A SIGN THAT WE REALIZED IT EARLY.
I'VE FAILED SO.
DO YOU KNOW WHY?
N-NO.


I DON'T...
THERE ARE TWO POSSIBILITIES WE CAN COME UP WITH IN CASES WHERE THE BLOOD GLUCOSE LEVEL DIDN'T GO DOWN DESPITE THE TUMOR.
7
FIRST, THE TUMOR WAS INACTIVE WHEN THE TEST TOOK PLACE, WHICH IS A VERY RARE CASE.
ZZZZZ...
AND SECOND, THE PATIENT HIMSELF CONSUMED SOMETHING WITH GLUCOSE IN IT.
IN THAT KID'S CASE, IT'S PROBABLY THE LATTER, WHERE HE COULD HAVE DRANK SOME REFRESHING BEVERAGES BEFORE THE TEST.

NO WAY...
THAT'S WHY HIS BLOOD GLUCOSE LEVEL WAS NOT LOW.
!
KIDS ARE JUST LIKE THAT.
IT WAS "NOT TO EAT", RIGHT?
WE'VE TOLD HIM NOT TO EAT ANYTHING BEFORE THE TEST, AND YET...
8
A SKILLED DOCTOR SHOULD HAVE SUSPECTED THAT IT WAS DILUTED FROM LIQUID CONSUMPTION
EVEN WITHOUT ASKING, I COULD PREDICT IT.
DID YOU ASK ALL THOSE QUESTIONS TO THE PATIENT HIMSELF?
HIS BLOOD TEST TOLD ME THAT HIS HEMOGLOBIN LEVEL WAS BELOW NORMAL.

T-THAT'S WHY HE SUSPECTED INSULINOMA EVEN THOUGH THE BLOOD GLUCOSE LEVEL WAS NORMAL...
MUCH LESS A GENIUS LIKE DR.SAIJOU.
.....!
IN CASES OF INSULINOMA FOR PATIENTS, FASTING BEFORE A TEST IS UNBEARABLY HARD. ON TOP OF THAT, HE'S STILL A CHILD...
I AM TRULY SORRY, FATHER... THAT I'M SUCH AN INCOMPETENT ...
WELL, FOR INCOMPETENT PEOPLE LIKE YOU, WHO ONLY THINK ABOUT THEIR OWN PRIDE, THAT IS SIMPLY A TOTAL IMPOSSIBILITY, HUH?
EVEN IF YOU COULDN'T DIAGNOSE ANYTHING FROM THOSE NUMBERS, BY MERELY CONSIDERING THE PATIENT'S FEELINGS, YOU SHOULD HAVE BEEN ABLE TO DOUBT THE TEST RESULTS.
I DIDN'T RAISE YOU WELL ENOUGH.

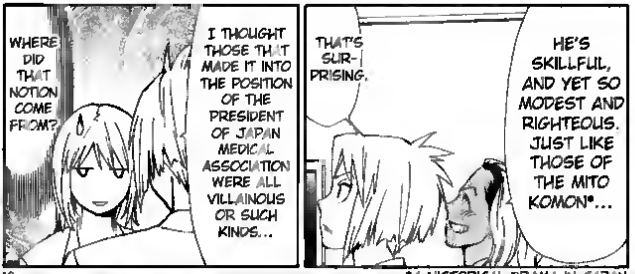
BEFORE LEARNING ABOUT MEDICS, YOU SHOULD HAVE LEARNT MORE ABOUT HUMANS.
YES
THAT GOES FOR YOU AS WELL, MR.ASSOCIATE DIRECTOR.
SFX: STIFF
10
IT'S QUITE ADMIRABLE THAT YOU MAINTAIN YOUR POSTURE EVEN AFTER YOU'VE BEEN CAUGHT RED-HANDED


OI, MEGUMI.
WHAT IS IT?

BUT WITH SUCH ARROGANCE.

THIS GUY...
HAS PASSED OUT.

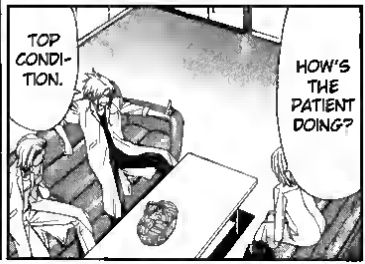
LET'S LAY HIM DOWN ON THE SOFA. GIVE ME A HAND.
O-OKAY!

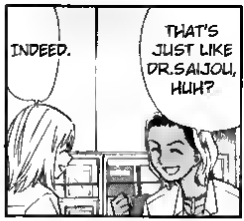

WHERE DID THAT NOTION COME FROM?
I THOUGHT THOSE THAT MADE IT INTO THE POSITION OF THE PRESIDENT OF JAPAN MEDICAL ASSOCIATION WERE ALL VILLAINOUS OR SUCH KINDS...
THAT'S SUR-PRISING.
HE'S SKILLFUL, AND YET SO MODEST AND RIGHTEOUS. JUST LIKE THOSE OF THE MITO KOMON*...

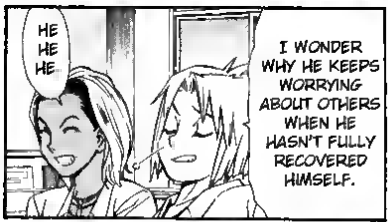
12

*A HISTORICAL DRAMA IN JAPAN.

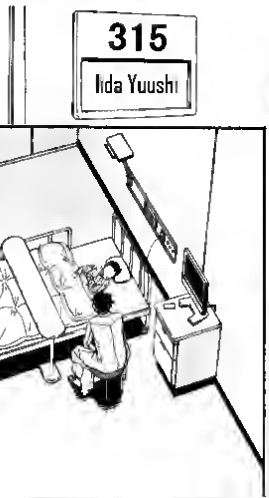
AND THE THING REGARDING THE "BEST DOCTOR" ALSO TURNED OUT WELL.
IT'S A HAPPY ENDING.
WELL, WHATEVER...
DR.AYAME, IT'S NOT LIKE THOSE WITH AUTHORITY = CRIMINALS

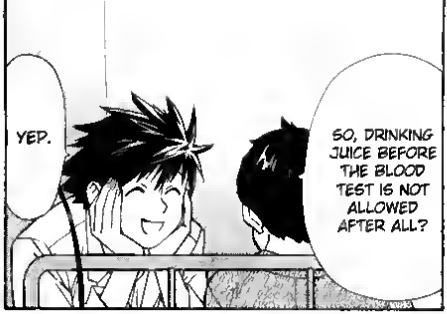






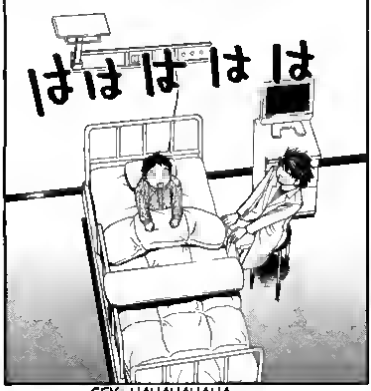
SFX: HAHAHAHA




YEP.
SO, DRINKING JUICE BEFORE THE BLOOD TEST IS NOT ALLOWED AFTER ALL?
EH?

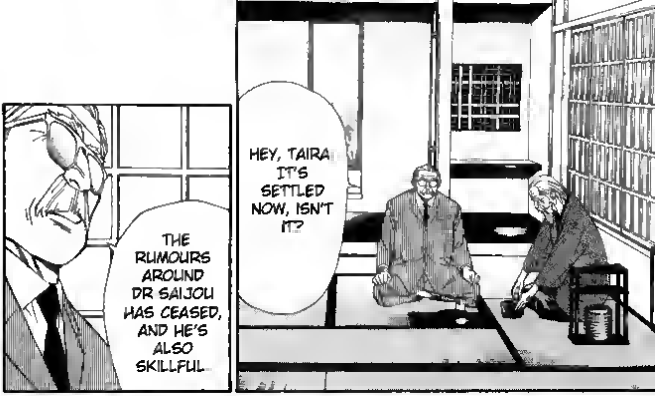
I SEE.
I COULDN'T HOLD MY HUNGER, SO I THOUGHT I'D TELL THE DOCTORS AFTERWARDS BUT SOMEHOW I COULDN'T GET THE WORDS OUT...
FIGURES...
I'M SORRY.
YOU SOUND LIKE YOU'VE KNOWN THAT, DON'T YOU?

YEP, I'M GONNA BE FINE.
BUT, MAKE SURE YOU DON'T DRINK ANYTHING BEFORE THE TESTS FROM NOW ON, OKAY?
EVEN WHEN WE WERE TALKING BEFORE THE SURGERY, HE KEPT HOLDING THE BOTTLE OF JUICE IN HIS HANDS...

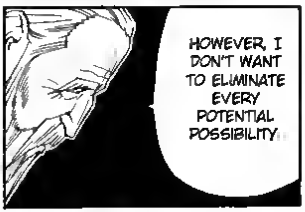


SFX: HAHAHAHAHA

SFX: SHAKE SHAKE


HEY, TAIRA IT'S SETTLED NOW, ISN'T IT?
THE RUMOURS AROUND DR SAIJOU HAS CEASED, AND HE'S ALSO SKILLFUL

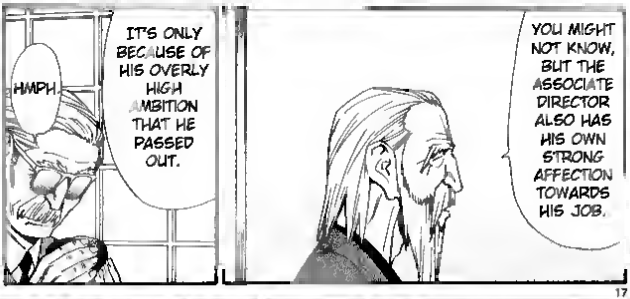
DIDN'T YOU ALSO SAID THAT THE INFORMATION YOU GATHERED IN SECRET WAS ALSO FULL OF HIS GOOD POINTS?


HOWEVER, I DON'T WANT TO ELIMINATE EVERY POTENTIAL POSSIBILITY.

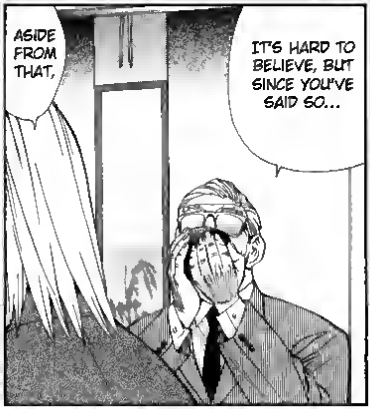
...WHY IS THAT?

YOU MIGHT BE RIGHT.
THERE'S NO ONE BETTER THAN HIM FOR THE "BEST DOCTOR", RIGHT?

DON'T SAY IT THAT WAY...
IF IT'S ABOUT THAT MAN, HE'S SLEEPING SOUNDLY ON HIS SOFA NOW.


HMPH.
IT'S ONLY BECAUSE OF HIS OVERLY HIGH AMBITION THAT HE PASSED OUT.
YOU MIGHT NOT KNOW, BUT THE ASSOCIATE DIRECTOR ALSO HAS HIS OWN STRONG AFFECTION TOWARDS HIS JOB.

THAT GENIUS SAIJOU MIKOTO IS NOT COMPLETELY PERFECT AS WELL.

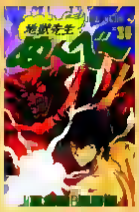

ASIDE FROM THAT,
IT'S HARD TO BELIEVE, BUT SINCE YOU'VE SAID SO...

WHILE IT DOES GIVE A GREAT STIMULUS, IT ALSO HAS A GREAT SIDE-AFFECT.
IF I'M TO DESCRIBE HIS EXISTENCE, HE'S LIKE A POWERFUL MEDICINE
OH? WHAT DOES THAT MEAN?
IT MIGHT BE TOO HARD FOR HIM TO UNDERSTAND AT SUCH A YOUNG AGE, BUT...
18
HE'S STILL TOO IGNORANT...
NOT UNDER-STANDING THAT PEOPLE CAN ALSO DIE FROM SUCH DRUGS.

BLAST Comic

NEEDS YOUR HELP!!

Cleaner + Typesetter



Typesetter

Typesetter

Another, we're also searching for someone who can provide us the raw for Tanaka-kun wa Itsumo Kedaruge.

Send us an e-mail to bcscans@gmail.com
or visit our website at
https://blastcomicscans.wordpress.com/

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO
WHITENINJA

CLEANER
FIRSTBLOOD116

RE-DRAWER
DJIDANEZOKAWA

DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

CHAPTER42:
RESPONSIBILITY OF
BEING A GENIUS

PEOPLE DIE FROM POWERFUL DRUGS...
ARE YOU SAYING THAT THE ASSOCIATE DIRECTOR IS AN EXAMPLE?
WELL, YES.

WELL, THAT'S JUST A MILD CASE.

HE FRETTED OVER A POWERFUL DRUG, NAMED DR.SAIJOU, THAT SHOWED UP BEFORE HIM. THUS, RESULTING IN HIM TAKING EVERY FOOLISH ACT HE COULD TAKE.

2

THOSE WHO ACT OUT OF THEIR JEALOUSY, WILL EVENTUALLY FALL AND LOSE THEIR SPOT IN SOCIETY.
THAT'S QUITE A ROUND-ABOUT

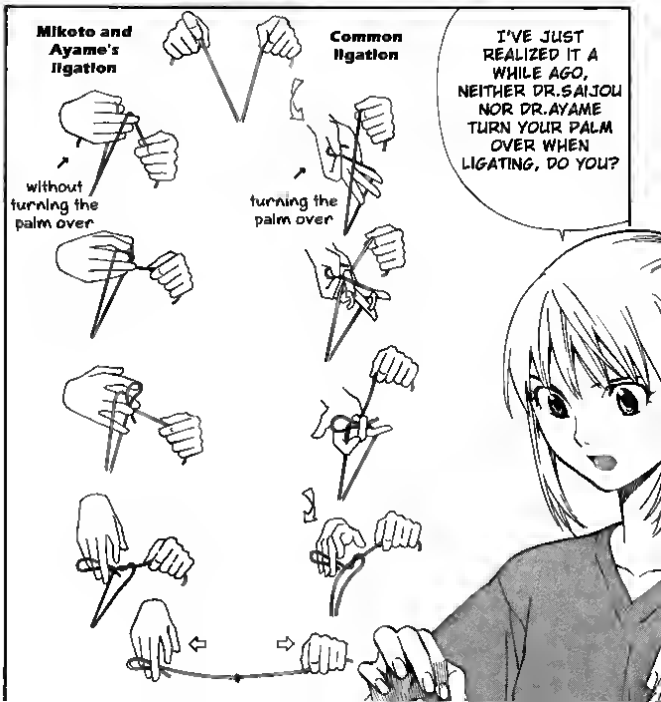
IT'S WHEN THE NUMBER OF PEOPLE WHO TRY TO IMITATE DR. SAIJOU, OUT OF ADMIRATION OF HIS INTELLIGENCE, INCREASES.
SO, WHAT IS THE SEVERE CASE?

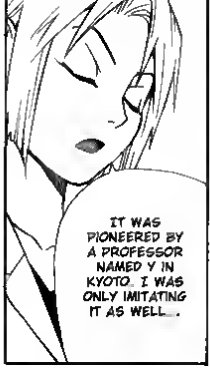
BUT WHEN AN ORDINARY PERSON TRIES TO IMITATE SOMETHING THAT'S OUT OF HIS LEAGUE...
OF COURSE, IF IT'S SOMETHING EASY THEN IT'S BETTER FOR THEM TO IMITATE HIM.

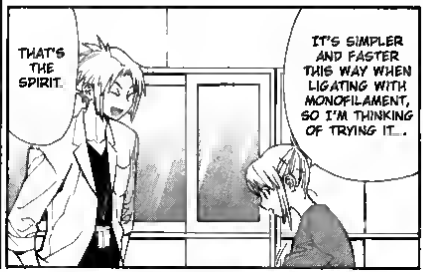
A WEEK LATER
IT WILL DEFINITELY LEAD TO A FATAL ACCIDENT.

YES ...
WHAT? YOU'RE PRACTI-CING ON LIGATING, SENA?
OH!
UHMN... IS IT THIS WAY?

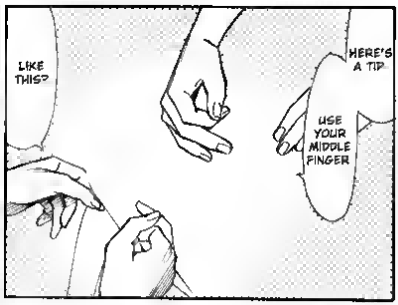
4


Mikoto and Ayame's ligation
without turning the palm over
Common ligation
turning the palm over
I'VE JUST REALIZED IT A WHILE AGO, NEITHER DR.SAIJOU NOR DR.AYAME TURN YOUR PALM OVER WHEN LIGATING, DO YOU?


IT WAS PIONEERED BY A PROFESSOR NAMED Y IN KYOTO. I WAS ONLY IMITATING IT AS WELL...

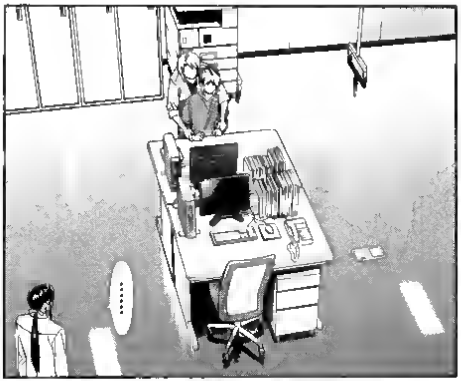

THAT'S THE SPIRIT.
IT'S SIMPLER AND FASTER THIS WAY WHEN LIGATING WITH MONOFILAMENT, SO I'M THINKING OF TRYING IT...

NO


LIKE THIS?
HERE'S A TIP.
USE YOUR MIDDLE FINGER

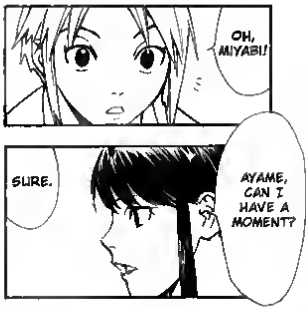
OI, AYAME.

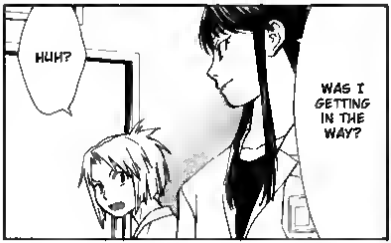
LEND ME YOUR HAND.


.....

LISTEN, HOLD THE THREAD LIKE THIS AND USE YOUR MIDDLE FINGER...
OKAY...

KEEP PRACTICING THE WAY I'VE TAUGHT YOU JUST NOW
OKAY.


OH, MIYABI!
AYAME, CAN I HAVE A MOMENT?
SURE.


WAS I GETTING IN THE WAY?
HUH?

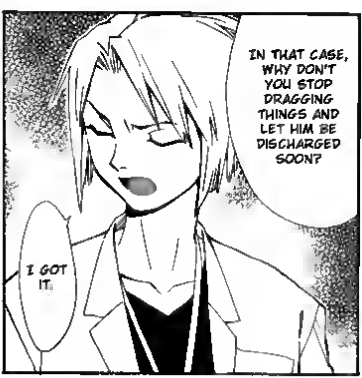
MIYAJIMA-SENSEI'S THE ANESTHETIST
THERE, ALL DONE
SHE GOOD TO GO
MORE IMPORTANTLY, ABOUT MIKOTO'S RECENT SURGERY ...

JUST KIDDING
WHAT ARE YOU TALKING ABOUT? I WAS JUST..

.....
COULD YOU BE OVERTHINKING THINGS?

I'VE WATCHED THE VIDEO SINCE IT WAS BOTHERING YOU, BUT AS AN ANESTHETIST I CAN SAY FOR SURE THERE'S NOTHING TO BE WORRIED OF.

7


IN THAT CASE, WHY DON'T YOU STOP DRAGGING THINGS AND LET HIM BE DISCHARGED SOON?
I GOT IT.

THERE WAS NOTHING WRONG IN THE TEST RESULT AS WELL, RIGHT?
LET'S HOPE SO..

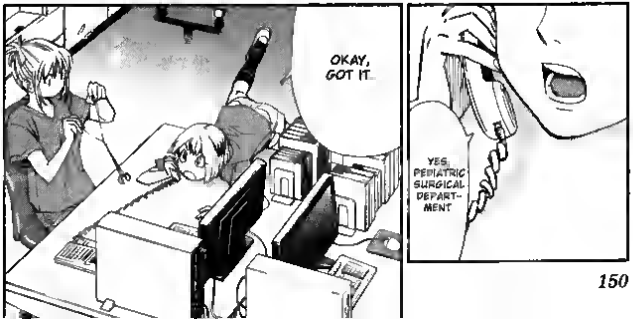
IT'S TRUE THAT A WEEK HAS PASSED SINCE THE PANCREAS SURGERY AND MIKOTO'S BEEN RESTING PROPERLY.
DON'T WORRY.
NATURALLY YOU'LL NEED 2 WEEKS OF BEST AND YET...
THAT'S NOT WHAT I MEANT.
CALM DOWN.
AFTER THIS IS OVER, I'LL REST PROPERLY FOR THE REMAINING WEEK.
MY DOUBTS HAVEN'T COMPLETELY CLEARED YET, BUT I GUESS IT CAN'T BE HELPED.
I'LL GO ISSUE A DISCHARGE NOTICE NOW.
...I SEE.
THEN
.....
SERIOUSLY, I DON'T KNOW IF IT'S BECAUSE HE WORRIED TOO MUCH OR ANYTHING...
BUT, INDEED, THERE IS SOMETHING OFF.
TO BE HONEST, MIKOTO'S ANESTHESIA IS ALSO BOTHERING ME.
BUT RATHER, WHAT BOTHERS ME MORE IS THAT WHY AYAME DIDN'T DEMAND MIKOTO FOR THE REASON DIRECTLY.
OH, DR. MIYABI.

PERFECT
Please take a look! See?
I CAN LIGATE WITHOUT TURNING MY PALM OVER NOW...
OH! YOU'RE GOOD! LIGATING WITH PROF Y'S LIGAMENT
Hehehe
IT'S WORTH THE EFFORT TO PRACTICE IT OVER.

YOU'RE ALWAYS SERIOUSLY PRACTICING ON SOMETHING
YOU FLATTER ME TOO MUCH
WHILE DR SAIJOU IS HOSPITALIZED, EVEN THOUGH YOU'VE BEEN ON SHIFTS FOR DAYS WITH ME...
MARIA -CHAN SURE IS ADMIRABLE.

RING RING RING
DR SAIJOU ALWAYS TOLD ME THAT THE BASICS ARE THE MOST IMPORTANT. BESIDES, WHAT I CAN IMITATE IS ONLY...
BUT THIS IS JUST A GIVEN

10


OKAY, GOT IT.
YES, PEDIATRIC SURGICAL DEPARTMENT

CLACK
WHAT'S WRONG?
I'LL HEAD THERE RIGHT AWAY
OKAY!
I'LL GO TAKE A LOOK KEEP A WATCH HERE
SOMEHOW, A PATIENT IN THE PEDIATRIC INTERNAL DEPARTMENT GOT WORSE ALL OF SUDDEN
9
3
SFX SILENT
OKAY, WHAT SHOULD I PRACTICE ON NEXT?

RING
RING
NG? ANOTHER CALL?
RING
RING
ONE DAY, I ALSO WANT TO DO AN INCREDIBLE SURGERY LIKE DR.SAIJOU OR DR.AYAME...
ACTUALLY, THERE'S A 5 YEAR OLD PATIENT, IT SEEMS THAT HE WAS HIT HARD ON HIS CHEST BY A CAR...
HELLO, IT'S ER HERE
YES, PEDIATRIC SURGICAL DEPARTMENT
12
HOW'S HIS CONDITION?
!
EH...?
OTHER HOSPITALS HAVE REFUSED TO TAKE HIM DUE TO WORKER SHORTAGE, AND OUR ER ALSO HAVE NO FREE DOCTORS AT THE MOMENT...

I-IT'S FINE, MARIA
PLEASE LET HIM IN.
I-I SEE...
HIS OUTER WOUNDS DOESN'T LOOK SEVERE, CONSCIOUSNESS LEVEL 200, AND SEEMS TO BE RESPONSIVE.
N-NO.
IF IT'S NOT POSSIBLE, WE WILL NOT TAKE HIM IN AS WELL...?

IF THERE'S NOT OUTER WOUND, IT COULD BE A MERE BRUISE... IN THAT CASE, EVEN I SHOULD BE ABLE TO DO SOMETHING.
13
I'LL HEAD THERE RIGHT AWAY.
DR SAIJOU WILL NEVER COWER AWAY IN SITUATION LIKE THIS. .!

Y-YES.
MADAM,

HIS FACE LOOKS TERRIBLE... THIS COULD BE NOT A MERE BRUISE...

I LET HIM OUT OF MY SIGHT FOR A WHILE AND HE JUST RAN OUT SUDDENLY...

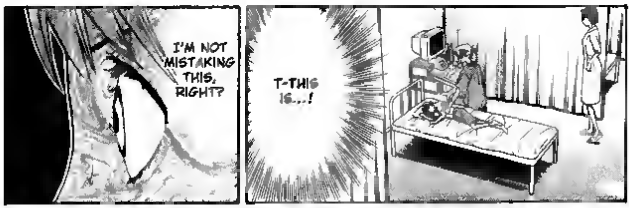
YES.
I HEARD HE HIT HIS CHEST HARD ON A CAR...?

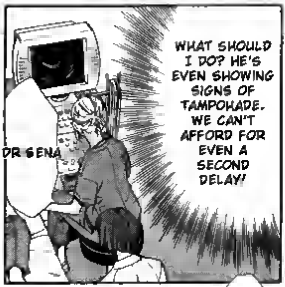
MS NURSE, PLEASE PREPARE FOR A SONOGRAM RIGHT AWAY

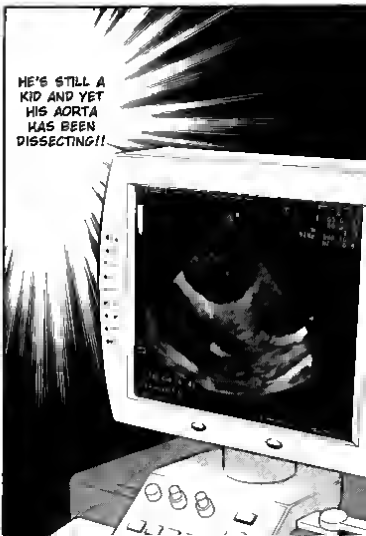
I CAN'T CONFIRM IT WITHOUT PROPER DIAGNOSIS, BUT COULD IT BE CARDIAC TAMPONADE...?

A BACK PAIN AFTER A CHEST TRAUMA ...?
I SEE.
I DIDN'T SEE WHERE HE WAS HIT, BUT HE CLAIMED THAT AFTER HE GOT HIT IN HIS CHEST, HIS BACK STARTED TO HURT.

AND PLEASE GET DR.NATSUME FROM PEDIATRIC SURGICAL IMMEDIATELY.
I GOT IT.


I'M NOT MISTAKING THIS, RIGHT?
T-THIS IS...!


WHAT SHOULD I DO? HE'S EVEN SHOWING SIGNS OF TAMPONADE. WE CAN'T AFFORD FOR EVEN A SECOND DELAY!
DR.SENA


HE'S STILL A KID AND YET HIS AORTA HAS BEEN DISSECTING!!

DR.SENA ?
Y-YES!

!
OH, NO...!!
UNFORTUNATELY, DR. NATSUME IS IN THE MIDDLE OF EMERGENCY OPERATION ON A RUPTURED ESOPHAGUS VARICES PATIENT RIGHT NOW...
A-AND ...
PLEASE CALL FOR AN ANESTHETIST AND PREPARE FOR EMERGENCY OPERATION RIGHT AWAY.
IT'S IMPOSSIBLE FOR ME TO DO THIS ALONE...!
THINKING BACK, I SHOULD HAVE BEEN ABLE TO PREDICT THIS KIND OF OUTCOME...
YES.
DASH
THEY MAY BE ON THEIR WAY HOME, BUT... PLEASE CONTACT DR SAIJOU, DR AYAME AND DR SAKAMOTO AS WELL!
17
I...I'M SUCH A FOOL.
.....

YET, I KEPT TRYING TO IMITATE DR. SAIJOU'S ACT...
AT THIS RATE, THIS KID'S GOING TO DIE.

IT'S ALL MY FAULT.

BLAST Comic

NEEDS YOUR HELP!!

Cleaner + Typesetter

Typesetter

Another, we're also searching for someone who can provide us the raw for Tanaka-kun wa Itsumo Kedaruge.

Send us an e-mail to bcscans@gmail.com
or visit our website at
https://blastcomicscans.wordpress.com/

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO
WHITENINJA

CLEANER
FIRSTBLOOD116

RE-DRAWER
DJIDANEZOKAWA

DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

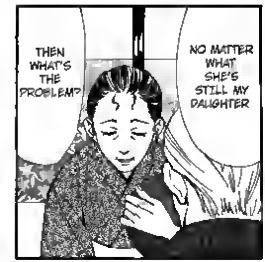
CHAPTER 43:
DUTY OF A GENIUS

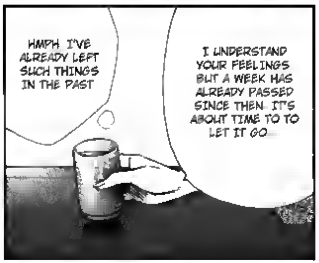
SANO'S RESIDENT
.....

YOU'VE HAD THAT DEJECTED LOOK EVER SINCE MEGUMI LIED TO YOU
SANO'S MOM: SANO TSUMEKO

OH, MY YOU'RE AT IT AGAIN

2


THEN WHAT'S THE PROBLEM?
NO MATTER WHAT SHE'S STILL MY DAUGHTER

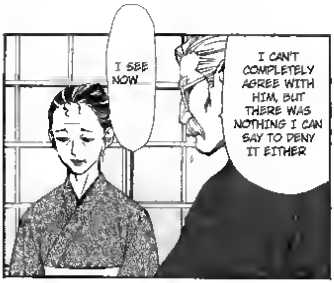

HMPH. I'VE ALREADY LEFT SUCH THINGS IN THE PAST
I UNDERSTAND YOUR FEELINGS BUT A WEEK HAS ALREADY PASSED SINCE THEN. IT'S ABOUT TIME TO TO LET IT GO

WELL, I GUESS THERE'S NOTHING WRONG IN TELLING YOU.
SIGH
I'M NOT AS SHARP AS YOU, SO I WON'T UNDERSTAND UNLESS YOU SAY IT ALOUD.
9
IT'S WHEN THE PEOPLE WHO TRY TO IMITATE DR. SAIJOU, OUT OF ADMIRATION OF HIS INTELLIGENCE, INCREASES
BUT WHEN AN ORDINARY PERSON TRIES TO IMITATE SOMETHING THAT'S OUT OF THEIR LEAGUE...
IT WILL DEFINITELY LEAD TO A FATAL ACCIDENT
AN ORDINARY PERSON TRYING TO IMITATE DR SAIJOU COULD LEAD TO A FATAL ACCIDENT YOU SAY...
I JUST RECALLED MY CONVERSATION WITH TAIRA
HOWE-VER, TAIRA
FUFUFU... YOU HAVEN'T CHANGED.
SHOULD THE ONE TO GET BLAMED BE THE ORDINARY PERSON THAT TRIED TO DO SOMETHING OUT OF THEIR CAPABILITY INSTEAD OF DR SAIJOU?

IT'S A FACT THAT YOU'RE A GENIUS AMONG BRILLIANT INTERNISTS
.....!!
IT'S THAT WAY OF THINKING THAT LEAD TO YOUR FAILURE IN BRINGING UP YOUR DAUGHTER
THAT KIND OF HUMILITY IS JUST UNTHINKABLE FOR YOU, HUH?
I LOOKED UP TO THOSE EYES THAT HAVE SOLVED MANY CASES FLAWLESSLY
I WANTED TO BE CLOSE TO YOU AS MUCH AS POSSIBLE AND TO BE LOOKED AT BY YOU WITH THOSE EYES
ONE OF MY FAVORITE QUOTES AS A PERSON INTERESTED IN THE MIND: IMPORTANT THINGS FOR A DOCTOR TO DO TO PROSPER AS AN M.D. ARE "OBTAIN THE TRUTH"
BUT AS A RESULT OF SHOWING SUCH INTELLIGENCE, YOUR DAUGHTER LOOKED UP TO YOU EXCEPTIONALLY
DO YOU KNOW WHY?
NORMALLY, WHEN THERE ARE UNSOLVED MEDICAL CASES, THE APPROPRIATE COURSE OF ACTION IS TO TRANSFER IT TO THE SPECIALISTS IN UNIVERSITY HOSPITALS
BUT YOU IGNORED THAT TO PROTECT YOUR OWN PRIDE
SHE TRIED TO DO SOMETHING OUT OF HER CAPABILITY AND TRIGGERED THE RECENT INCIDENT
WHO?
THEN YOU WANT TO IDENTIFY YOUR OWN MISTAKE AS WELL?
I JUST WANTED TO BE LIKE YOU, WHO CAN IDENTIFY ANY MISTAKES...
THERE ARE TWO POSSIBILITIES WE CAN COME UP WITH IN CASES WHERE THE BLOOD ANALYSIS DATA DON'T MATCH THE SYMPTOMS
UH-HUH...

I BELIEVE THERE'S A DUTY FOR BEING A GENIUS
SANO TO ME
WHEN YOU SAY IT THAT WAY, IT HURTS...
IT DOES SOUND GOOD BUT IT IS JUST IMPOSSIBLE FOR MOST ORDINARY DOCTORS
DIAGNOSING A DISEASE RIGHT AWAY. OPERATING WITH GODLY TECHNIQUES NEVER ABANDONING A PATIENT NO MATTER THEIR CONDITION
EXACT-LY
A DUTY FOR BEING A GENIUS
THAT'S THE DUTY GRANTED TO THOSE GENIUSES.
TONK
THAT'S WHY, RATHER THAN LET THOSE ORDINARY DOCTORS IMITATE HIM RECKLESSLY, HE SHOULD SET A BOUNDARY AND GUIDE THEM.

THAT'S ONE REQUIREMENT NEEDED IN ORDER TO OBTAIN THE TITLE OF THE "BEST DOCTOR"
I SEE
SO YOU'RE EXPECTATING THAT HIGH ON DR SAIJOU AS WELL?
OF COURSE I AM
DIFFERENT FROM ANY OTHER CAREER A DOCTOR'S FAILURE COULD LEAD TO PATIENT'S DEATH
I WOULDN'T CARE IF HE'S JUST AN ORDINARY GENIUS BUT FOR THE "BEST DOCTOR" THAT IS A MUST
WHAT I NEED IS PERFECTION
HMM... HMM HMM...

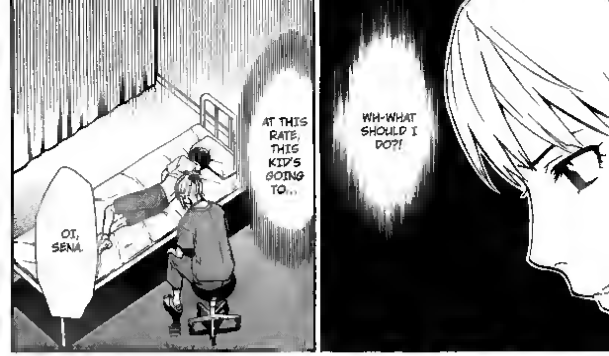

I SEE NOW
I CAN'T COMPLETELY AGREE WITH HIM, BUT THERE WAS NOTHING I CAN SAY TO DENY IT EITHER
WELL IT WAS SUCH A DISCUSSION

IF EVEN DR SAIJOU IS NOT UP TO THE REQUIREMENT
I WONDER IF ANYONE ON EARTH IS

AS EXPECTED FROM TAIRA HE'S NOT SOMEONE YOU CAN NEGOTIATE WITH

YEAH
THAT'S WHY HE'S NOT MARRIED NOR DOES HE HAVE ANY CHILDREN AT HIS AGE

I SERIOUSLY DOUBT IT THOUGH


OI, SENA.
AT THIS RATE, THIS KID'S GOING TO...
WH-WHAT SHOULD I DO?!

SHIRA-NUI!
DR MIYABI...!
YOU OK SENA?
ARE YOU ALRIGHT?!

I-I SEE
WE'RE MEANT TO GO TO OUR APPOINTMENT TOGETHER, BUT THE NURSE CALLED US BACK
YEAH
SO YOU TWO HAVENT GONE HOME YET
THANK GOOD-NESS

I BELIEVE THE CAUSE IS DUE TO A CHEST TRAUMA FROM AN ACCIDENT
HE'S SHOWING SIGNS OF CARDIAC TAMPONADE
WAIT THESE TWO ARE GOING HOME TOGETHER?!
ANYWAY WHAT'S THE SITUATION?
HAVE YOU CONTACTED MIKOTO AYAME AND DR SAKAMOTO?
YES...
MOREOVER, HE ALSO HAS AN AORTIC DISSECTION ALTHOUGH HE'S STILL A KID...
9
BUT WE CAN'T AFFORD ANYMORE TIME LOST
I SEE...
BUT NONE OF THEM HAVE CONTACTED ME BACK YET

WH-
WHAT'S WRONG ?!
LET'S GIVE HIM EMERGENCY TREATMENT OURSELVES FIRST
AKH!

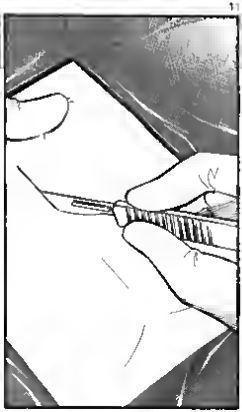
HE'S LOST CONSCIOUSNESS. !!

10

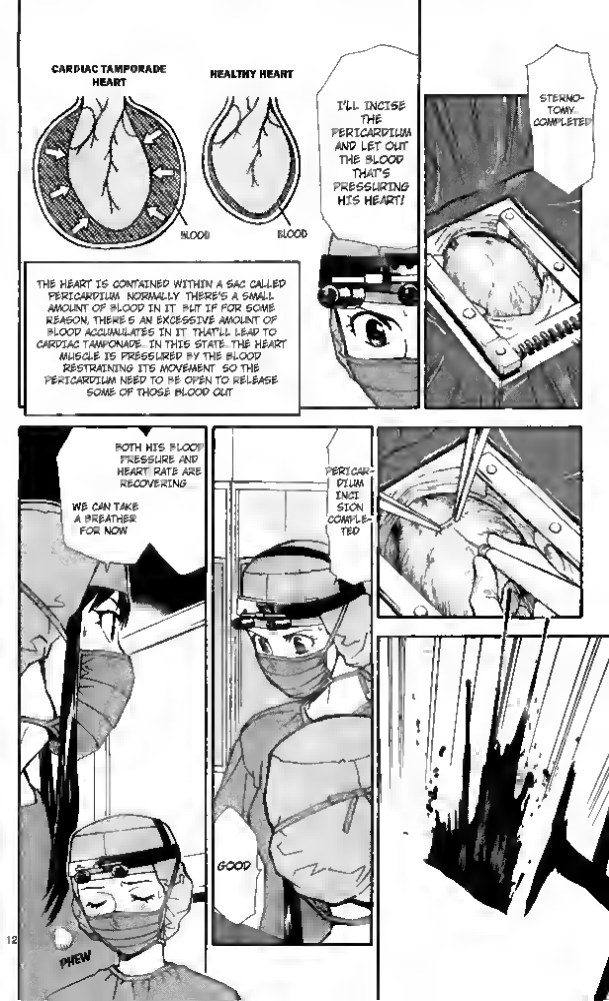
HIS TAMPONADE IS PROBABLY DETERIORATING!
OH NO! I CAN'T FEEL HIS PULSE!
THIS IS BAD

HE NEEDS IMMEDIATE THORACOTOMY. PREPARE FOR TRANSFUSION!!
YES!

SENA, HIS HEART RATE IS DROPPING! AT THIS RATE HIS HEART WILL COLLAPSE!!



YES!
HURRY! THERE'S NO TIME!


CARDIAC TAMPORADE HEART
HEALTHY HEART
BLOOD
BLOOD
THE HEART IS CONTAINED WITHIN A SAC CALLED PERICARDIUM. NORMALLY THERE'S A SMALL AMOUNT OF BLOOD IN IT. BUT IF FOR SOME REASON, THERE'S AN EXCESSIVE AMOUNT OF BLOOD ACCUMULATES IN IT. THAT'LL LEAD TO CARDIAC TAMPONADE. IN THIS STATE, THE HEART MUSCLE IS PRESSURED BY THE BLOOD RESTRAINING ITS MOVEMENT. SO THE PERICARDIUM NEED TO BE OPEN TO RELEASE SOME OF THOSE BLOOD OUT
I'LL INCISE THE PERICARDIUM AND LET OUT THE BLOOD THAT'S PRESSURING HIS HEART!
STERNOTOMY COMPLETED!
BOTH HIS BLOOD PRESSURE AND HEART RATE ARE RECOVERING
WE CAN TAKE A BREATHER FOR NOW
PHEW
PERICARDIUM INCISION COMPLETED
GOOD

MAN SENA'S TRULY IMPRESSIVE HERE

OKAY
THEN, I'LL LEAVE THE BLOOD SUCTION TO YOU.

HEHEHE THORACO-TOMY AND INCISING IS JUST THE BASIC, NOTHING SPECIAL
I GUESS LEAVING IT TO YOU WAS THE RIGHT CHOICE

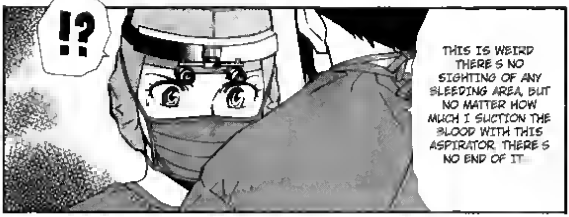
I WAS THINKING SHOULD I BE THE ONE TO DO IT SINCE I M STILL A SENIOR BUT I'M SPECIALIZED IN GASTRO-ENTEROLOGICAL, YOU SEE.

13

I'M SO ENVIOUS I ALSO WANT TO FINISH MY DUTY IN THE ADMINISTRATIVE DEPT AND TRANSFER TO PEDIATRIC SURGICAL DEPT QUICKL-

WHAT'S WRONG?
NG?

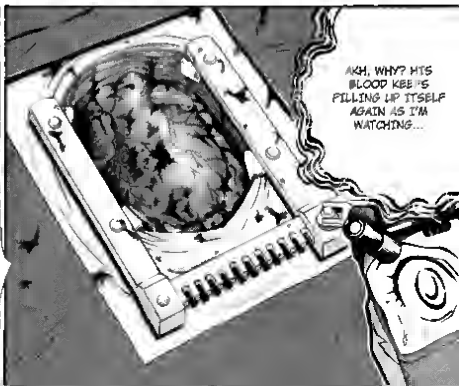
I SEE...
I'VE ALWAYS BEEN PRACTICING UNDER DR SAIJOU AND DR AYAME AS WELL


!?
THIS IS WEIRD THERE'S NO SIGHTING OF ANY BLEEDING AREA, BUT NO MATTER HOW MUCH I SUCTION THE BLOOD WITH THIS ASPIRATOR, THERE'S NO END OF IT.

!!
HIS BLOOD PRESSURE PUMMELED AGAIN ALL OF SUDDEN!

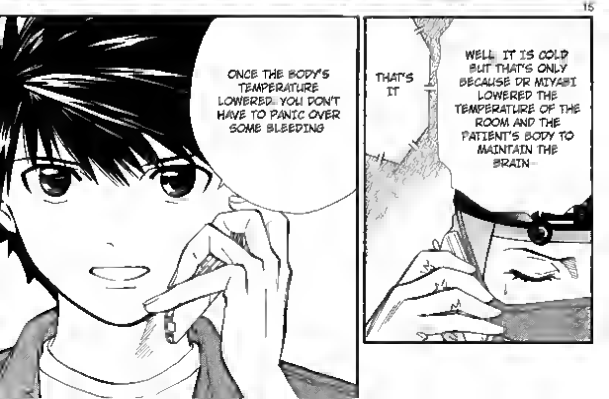
I DON'T KNOW
IS THERE A MAJOR BLEEDING SOMEWHERE?!
OI, WHAT HAPPENED?!

TH-THIS IS THE END...
DR SENA!!

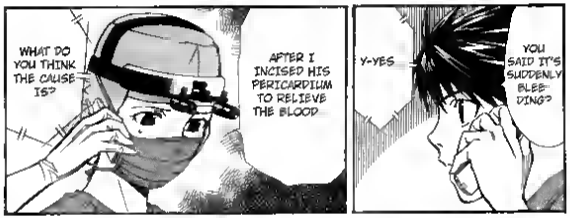

AKH, WHY? HIS BLOOD KEEPS FILLING UP ITSELF AGAIN AS I'M WATCHING...

I'VE BEEN BRIEFED WITH THE SITUATION.
BECAUSE OF ME... THAT...
DR. SAIJOU, WE'RE IN BIG TROUBLE!
!!
I'VE PUT IT IN SPEAKER MODE.
WE'VE A CONTACT WITH DR SAIJOU!

WHAT'RE YOU TALKING ABOUT IN SUCH SITUATIONS!
THAT ROOM IS FRIGGIN COLD, ISN'T IT?
HEY, SENA.
NO, THAT'S NOT IT... RIGHT NOW THERE'S A SUDDEN MYSTERIOUS BLEEDING, SOMEONE AS INCAPABLE AND INEXPERIENCED LIKE ME IS JUST...


ONCE THE BODY'S TEMPERATURE LOWERED, YOU DON'T HAVE TO PANIC OVER SOME BLEEDING
THAT'S IT
WELL, IT IS COLD BUT THAT'S ONLY BECAUSE DR MIYABI LOWERED THE TEMPERATURE OF THE ROOM AND THE PATIENT'S BODY TO MAINTAIN THE BRAIN-

WHAT A GUY!
HE CALMED THE SURGEON ONLY BY THOSE WORDS!
ANYWAY, YOU NEED TO CALM DOWN
A-AWESOME!


WHAT DO YOU THINK THE CAUSE IS?
AFTER I INCISED HIS PERICARDIUM TO RELIEVE THE BLOOD
Y-YES
YOU SAID IT'S SUDDENLY BLEEDING?

18

THE REASON IT DIDN'T BLEED MUCH UP UNTIL NOW WAS BECAUSE THE BLOOD PRESSURE WAS LOW DUE TO THE TAMPONADE
W-WELL NOW THAT I THINK OVER IT CALMLY, I GUESS THE WOUND WAS ALREADY THERE IN THE BEGINNING

YOU'RE ASKING THE CAUSE

MAYBE IT'S AT THE BACKSIDE
CAN YOU SEE THE WOUND?
BUT WHEN I WAS RELIEVED THAT HIS BLOOD PRESSURE WAS BACK TO NORMAL... IT RESULTED IN A SUDDEN MAJOR BLEEDING AT THE WOUND DUE TO A HIGH BLOOD PRESSURE
IT'S PRECISELY BECAUSE WE CAN'T SEE IT THAT IT'S PROBLEMATIC
IF THE WOUND'S THERE FROM BEFORE THE SURGERY THERE S A HIGH CHANCE IT'S AT THE DISSECTED AORTA—
THAT'S RIGHT!
17
YEP. IT'S HERE. I CAN PRESS IT WITH MY HAND
W-WE'VE FOUND IT DR SAIJOU!
SEE? IT'S EASY IF YOU CALM DOWN
OKAY I'LL SEARCH FOR IT!
IT'S AT THE DORSAL (BACK) SIDE!

EXACT
-LY
OF COURSE I CAN
IT'S NOT LIKE I'M A BABY
100M? WHAT'S THIS ABOUT?
SENA, YOU CAN RUN 100M, CAN'T YOU?
ONE DOESN'T NECESSARILY HAVE TO BE TALENTED OR EXPERIENCED AS LONG AS THEY HAVE THE SPIRIT ANYONE CAN SAVE PEOPLE
EVERYONE CAN RUN 100M, ALTHOUGH THEY CAN'T HOLD WORLD RECORD LIKE BOLT*.

*USAIN BOLT 100M & 200M WORLD RECORD HOLDER.

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO

CLEANER
FIRSTBLOOD116

RE-DRAWER
DJIDANEZOKAWA

TYPESETTER
AINE

DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

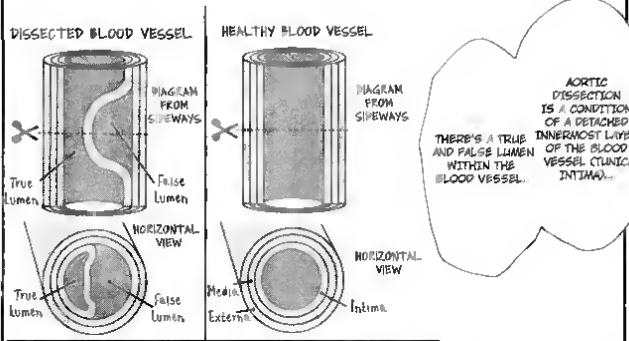
VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

CHAPTER 44:
A WAY ANYONE CAN DO.

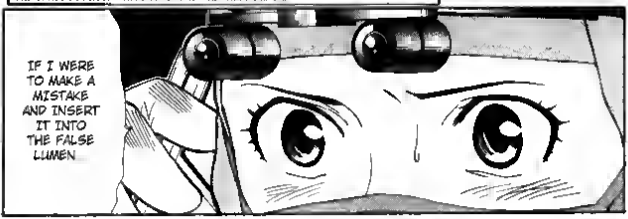
I'LL DO MY BEST. I'M COUNTING ON YOUR GUIDANCE.
OKAY
GOT THAT, DR SAIJOU.
.....
OKAY
IF WE CAN SECURE HIS BLOOD FLOW, WE CAN AT LEAST MAINTAIN HIM UNTIL I ARRIVE.
NEXT STEP IS INSTALLING THE HEART-LUNG MACHINE
2
IF YOU INSERT IT FROM THE LEG, THE BLOOD FLOW WON'T REACH HIS BRAIN. IN THAT CASE, YOU'LL NEED ANOTHER CANNULATION ON HIS ARMPIT OR NECK. .
NO. I DON'T SUGGEST THAT
IT SEEMS DIFFICULT BUT I'LL TRY CANNULATION FROM HIS LEG'S FEMORAL ARTERY

HOW DID HE KNOW...?
NO...?
Y-YES...
BESIDES, THE KID'S RATHER SKINNY, RIGHT?
AND I THINK IT'D BE DIFFICULT FOR SENA TO INSERT IT INTO A 5-YEAR-OLD'S THIN BLOOD VESSELS.
ANYWAY FOR NOW, LET'S DO THIS IN A WAY THAT CAN BE DONE FOR ANYONE.
DID HE HEAR IT FROM THE NURSE?
3

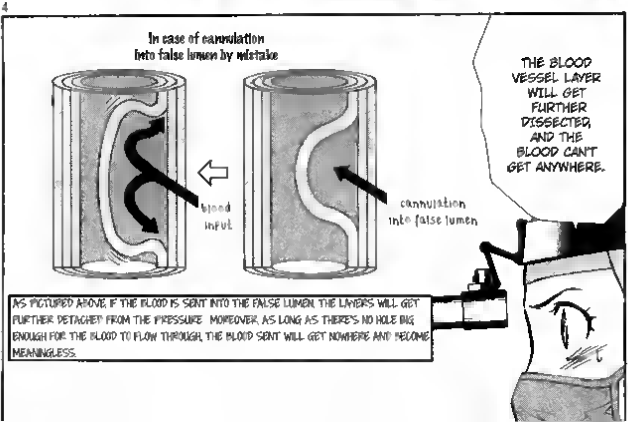
H-HOLD IT, DR SAIJOU.
WE'RE INSERTING IT FROM HIS DISSECTED AORTA.



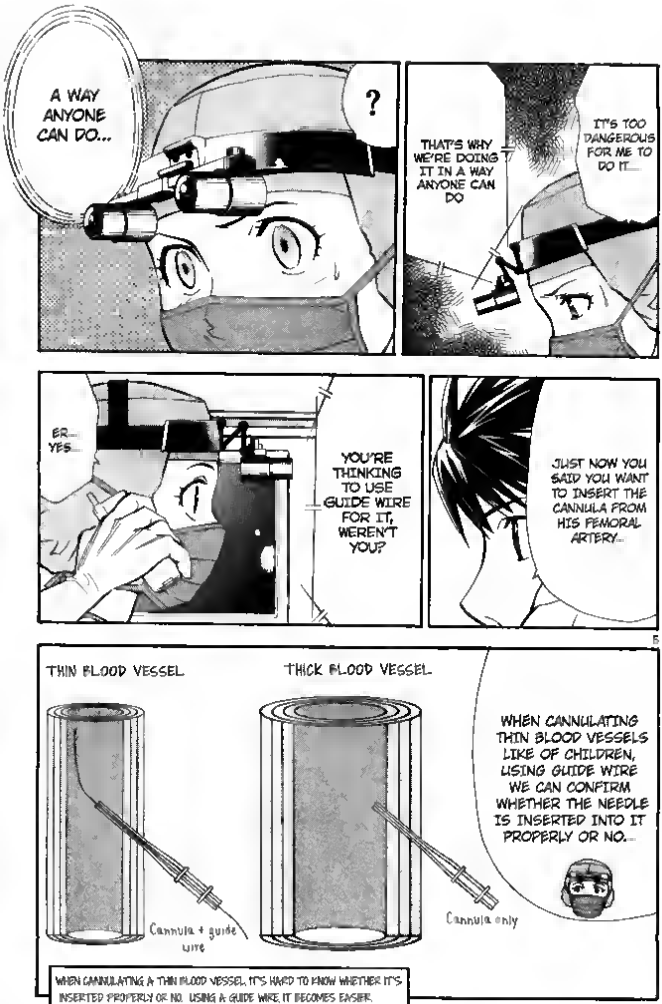
AS ILLUSTRATED ABOVE A HEALTHY BLOOD VESSEL IS CONSTRUCTED OF 3 LAYERS (INTIMA, MEDIA, EXTERNA). DUE TO SOME REASON THE INNERMOST LAYER IS DETACHED OR "DISSECTED" IN THAT CASE, THE SPACE WHERE THE BLOOD ORIGINALLY FLOWS IS THE TRUE LUMEN, WHILE THE SPACE BETWEEN THOSE LAYERS IS THE FALSE LUMEN.

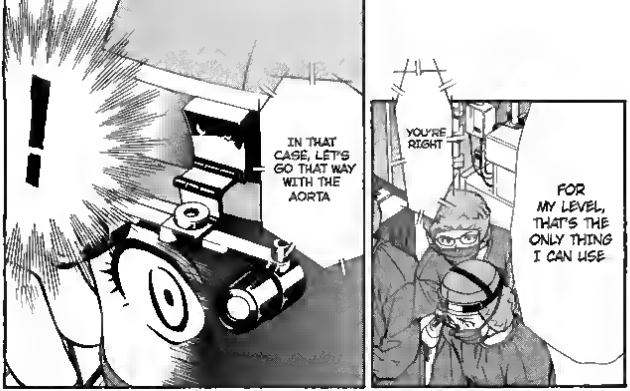


4


In case of cannulation into false lumen by mistake
blood inflow
cannulation into false lumen
THE BLOOD VESSEL LAYER WILL GET FURTHER DISSECTED, AND THE BLOOD CAN'T GET ANYWHERE.

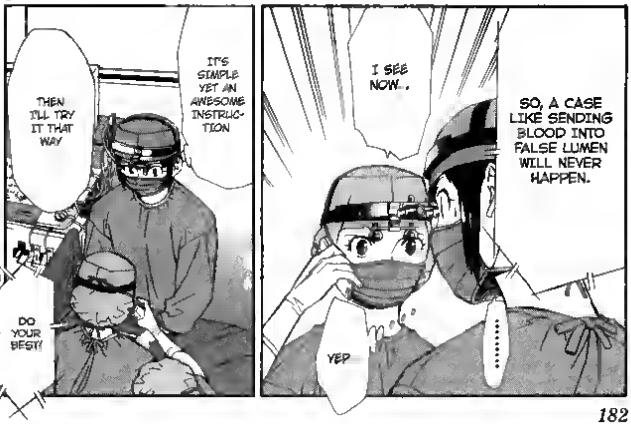
AS PICTURED ABOVE, IF THE BLOOD IS SENT INTO THE FALSE LUMEN, THE LAYERS WILL GET FURTHER DETACHED FROM THE PRESSURE. MOREOVER, AS LONG AS THERE'S NO HOLE BIG ENOUGH FOR THE BLOOD TO FLOW THROUGH, THE BLOOD SENT WILL GET NOWHERE AND BECOME MEANINGLESS.


A WAY ANYONE CAN DO...
?
THAT'S WHY WE'RE DOING IT IN A WAY ANYONE CAN DO
IT'S TOO DANGEROUS FOR ME TO DO IT...
ER... YES...
YOU'RE THINKING TO USE GUIDE WIRE FOR IT, WEREN'T YOU?
JUST NOW YOU SAID YOU WANT TO INSERT THE CANNULA FROM HIS FEMORAL ARTERY...
5
THIN BLOOD VESSEL
THICK BLOOD VESSEL
Cannula + guide wire
Cannula only
WHEN CANNULATING THIN BLOOD VESSELS LIKE OF CHILDREN, USING GUIDE WIRE WE CAN CONFIRM WHETHER THE NEEDLE IS INSERTED INTO IT PROPERLY OR NO...
WHEN CANNULATING A THIN BLOOD VESSEL, IT'S HARD TO KNOW WHETHER IT'S INSERTED PROPERLY OR NO. USING A GUIDE WIRE IT BECOMES EASIER.


!
IN THAT CASE, LET'S GO THAT WAY WITH THE AORTA
YOU'RE RIGHT
FOR MY LEVEL, THAT'S THE ONLY THING I CAN USE

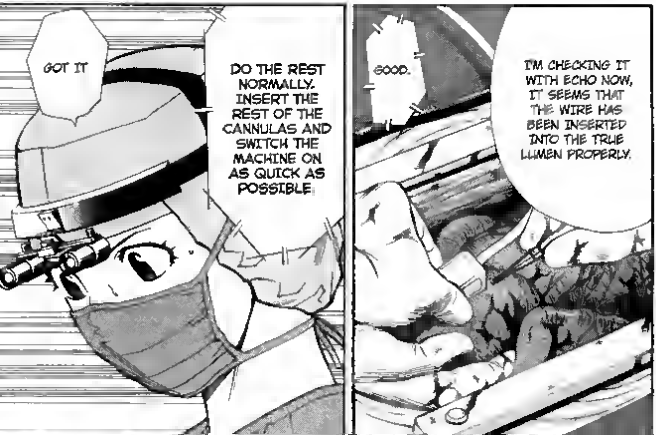
AS LONG AS WE USE GUIDE WIRE, WE'LL KNOW WHETHER IT'S INSERTED PROPERLY INTO THE TRUE LUMEN OR NOT...
EVEN IF IT'S DIVIDED INTO TRUE AND FALSE LUMEN, THE AORTA IS A PRETTY THICK BLOOD VESSEL TO BEGIN WITH...

6


THEN I'LL TRY IT THAT WAY
IT'S SIMPLE YET AN AWESOME INSTRUCTION
DO YOUR BEST!
I SEE NOW...
SO, A CASE LIKE SENDING BLOOD INTO FALSE LUMEN WILL NEVER HAPPEN.
YEP
.....

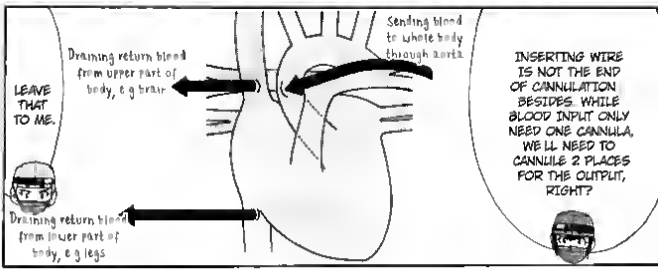
NORMALLY, YOU DON'T NEED GLIDE WIRE WHEN CANNULATING SUCH A THICK BLOOD VESSEL LIKE AORTA.
MUCH LESS A GENIUS LIKE DR. SAIJOU.

HOWEVER, HE STILL ASSUMES WHEN SOMEONE OTHER THAN HIM DOING IT AND THINKS OF A SIMPLE WAY TO DO IT...
D-DONE!!


I'M CHECKING IT WITH ECHO NOW, IT SEEMS THAT THE WIRE HAS BEEN INSERTED INTO THE TRUE LUMEN PROPERLY.
GOOD.
DO THE REST NORMALLY. INSERT THE REST OF THE CANNULAS AND SWITCH THE MACHINE ON AS QUICK AS POSSIBLE.
GOT IT

IF THE WOUND'S THERE, FROM BEFORE THE SURGERY, THERE'S A HIGH CHANCE IT'S AT THE DISSECTING AORTA
THAT'S USEFUL!!
BUT SINCE I NEED TO PRESS THE BACK OF HIS AORTA SO I'M LEFT WITH ONE HAND. WILL IT BE OKAY?
YUP. IT'S HERE. I CAN FEEL IT WITH MY HAND.
W-WE'VE FOUND IT, DR. SAIJOU!
SEE? IT'S EASY IF YOU CALM DOWN.

O-OKAY.
SHIRANUI, I'M GOING TO INSERT THE OTHER CANNULA, SO I'M COUNTING ON YOUR FOLLOW-UP.

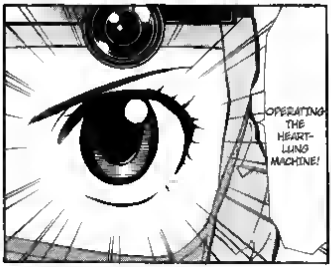

Draining return blood from upper part of body, e.g brain
Sending blood to whole body through aorta
LEAVE THAT TO ME.
Draining return blood from lower part of body, e.g legs
INSERTING WIRE IS NOT THE END OF CANNULATION. BESIDES, WHILE BLOOD INPUT ONLY NEED ONE CANNULA, WE'LL NEED TO CANNULE 2 PLACES FOR THE OUTPUT, RIGHT?

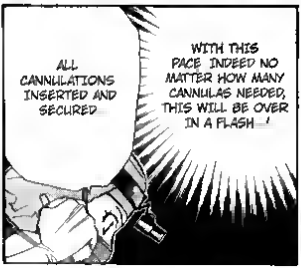
SO BASIC LIKE TYING CANNULAS IS JUST MY SPECIALTY

DR SAIJOU ALWAYS TOLD ME THAT THE BASIC IS THE MOST IMPORTANT THING.

S-SHE'S QUICK...!
THERE, THE PART TO SEND THE BLOOD IN IS DONE

WITH A LITTLE HELP

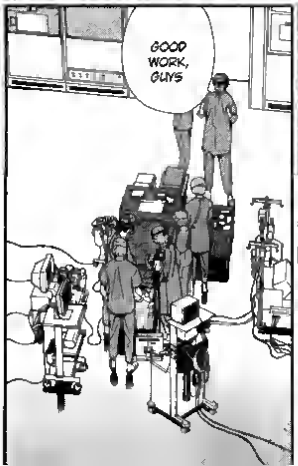

OPERATING THE HEART-LUNG MACHINE!

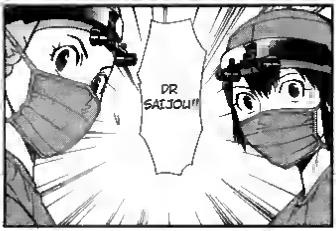

ALL CANNULATIONS INSERTED AND SECURED
WITH THIS PACE INDEED NO MATTER HOW MANY CANNULAS NEEDED, THIS WILL BE OVER IN A FLASH!

THEN, THE REST ...

OKAY, GOOD WORK.
IT'S ON, DR SAIJOH.

10





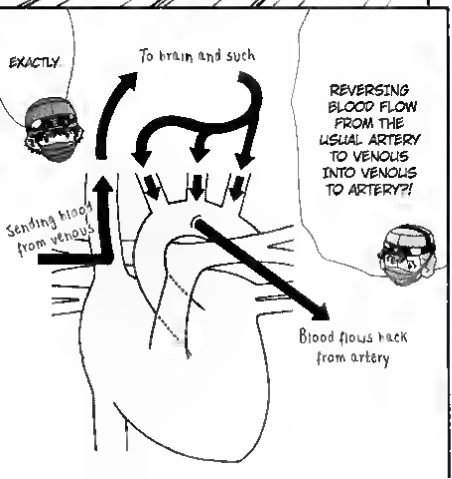
……
THIS IS THE RESULT FROM THE ECHO.
OKAY
I'LL TAKE OVER FROM HERE ON BUT BEFORE THAT, I'D LIKE TO SEE THE DISSECTION.
SINCE I TOOK A LOT OF TIME IN THE BEGINNING, IF WE'RE TO PERFORM SUCH SURGERY NOW I'M AFRAID IT'LL AFFECT HIS BRAIN.
YES.
SEEMS WE'LL NEED TO REPLACE HIS ASCENDING AORTA
BUT, EVEN I SAY SO..
IN WHATEVER KIND OF SURGERY, IT'S FINE AS LONG AS HEART-LUNG MACHINE CAN SEND BLOOD TO THE BRAIN, BUT...
I THINK SO TOO. WELL..
……
EVEN THOUGH DR. MIYABI HAS LOWERED THE TEMPERATURE, I THINK THE PERIOD OF BLOOD DEFICIENCY WAS PRETTY LONG.

replacing this part (ascending aorta) with an artificial artery
IN CASE THE HEART-LUNG MACHINE CAN'T BE USED LIKE THIS, THE ONLY WAY FOR SURGERY IS BY LOWERING PATIENT'S TEMPERATURE (BODY AND BRAIN THUS REDUCING THEIR ACTIVITIES). HOWEVER, THE TIME ALLOWED IS LIMITED IN THIS CASE WHERE LOTS OF TIME HAD BEEN SPENT
WHEN REPLACING THE ASCENDING AORTA WITH AN ARTIFICIAL ARTERY, WE CAN'T OPERATE THE WITH HEART-LUNG MACHINE BECAUSE THERE'S NO AORTA.

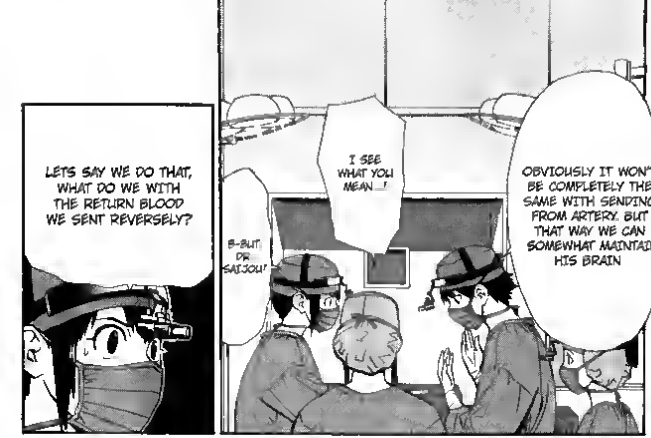
RIGHT, FIGURE; SO...
I'VE NEVER PLANNED OTHERWISE FROM START. THAT'S THE SAFEST.
OF COURSE, WE'LL KEEP IT ON.
FOR NOW, HIS BRAIN WAVE-LENGTH IS NORMAL. BUT STOPPING THE HEART-LUNG MACHINE FOR A LONG TIME IS TOO MUCH OF A DANGER.

BY CUTTING OFF THE HEART-LUNG MACHINE'S RETURN WAY AND REVERSE THE BLOOD FLOW, SENDING BLOOD ONLY TO HIS BRAIN.
WAIT! JUST WHAT KIND OF A JOKE WAS THAT MIKOTO?!
OBVIOUSLY WE CAN'T IF WE STAY LIKE THIS BUT WE CAN.
THERE'S NO WAY TO OPERATE WITH THE HEART-LUNG MACHINE WITHOUT THE ASCENDING AORTA!

THE RETROGADE CEREBRAL PERFUSION.


EXACTLY.
To brain and such
Sending blood from venous
REVERSING BLOOD FLOW FROM THE USUAL ARTERY TO VENOUS INTO VENOUS TO ARTERY?!
Blood flows back from artery

BY THAT . DO YOU MEAN


LETS SAY WE DO THAT, WHAT DO WE WITH THE RETURN BLOOD WE SENT REVERSELY?
B-BUT, DR. SAIJOU!
I SEE WHAT YOU MEAN...!
OBVIOUSLY IT WON'T BE COMPLETELY THE SAME WITH SENDING FROM ARTERY. BUT THAT WAY WE CAN SOMEWHAT MAINTAIN HIS BRAIN

14

THERE'S NOT MUCH BLOOD THAT CAN BE SENT FROM VENOUS. WITH 1 ASSISTANT TO KEEP SUCKING THE BLOOD, EVERYTHING'S SOLVED.
...I-IN-DEED...!
WE JUST NEED TO SUCK THE BLOOD OUT WITH THE ASPIRATOR.
WHILE THE REPLACEMENT AORTA REMAINS MISSING, WON'T THE BLOOD SPURT OUT ENDLESSLY...
Blood to brain
Blood from brain

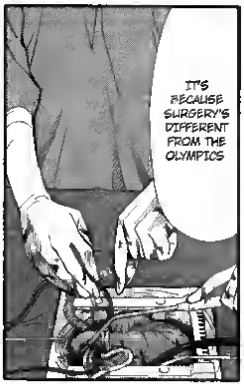
IN ANY CASE, WE NEED TO BE QUICK BUT BE CAREFUL NOT TO MISS ANYTHING
GOT IT!
WITH THAT WAY, EVERYONE CAN DO IT. MOREOVER, IT'S PERFECTLY SAFE... THAT'S THE PERFECT THING TO DO...!
OKAY. THEN, LET'S START RIGHT AWAY.
SENA, SUTURE THAT SIDE
G-GOT IT
S-SO FAST...! NO, IT'S NOT ABOUT THE SPEED!
15
ONTO SUTURING THE ARTIFICIAL ARTERY.
ASCENDING AORTA REMOVAL, COMPLETED.

YOU'RE ALL ABOUT SPEED HUH, MIKOTO?
SHE'S DESPERATELY DONE HER HOMEWORK, BUT DR SAIJOU IS STILL WAY FASTER...

THE TECHNIQUE SENA'S USING IS PROBABLY OF PROFY'S...

MAYBE.
WITH THIS, WOULDN'T WE MAKE IT ANYWAY EVEN WITHOUT RETROGRADE PERFUSION?

I THOUGHT IT'LL TAKE AT LEAST AN HOUR, BUT AT THIS PACE IT'LL BE OVER WITHIN 30 MINUTES


IT'S BECAUSE SURGERY'S DIFFERENT FROM THE OLYMPICS

BUT A WAY THAT CAN'T SUCCEED WITHOUT MY SPEED WON'T BE USEFUL AS A REFERENCE

Just like before, DrSaijou keep thinking about ways of surgery that even people other than him can do

As I've thought

SPEED IS IMPORTANT BUT MORE THAN ANYTHING, IT'S MORE IMPORTANT TO THINK OF A SECURE WAY THAT ANYONE CAN DO
HMPH THAT JUST SOUNDS LIKE YOU.

T-THAT'S A RELIEF-
THERE DOESN'T SEEM TO BE ANY PROBLEM, I GUESS WE'VE DONE GOOD

OKAY, ASCENDING AORTA REPLACEMENT COMPLETED
THIS IS AS WHAT CHAIRMAN TAIRA'S MENTIONED, "RESPONSIBILITY OF BEING A GENIUS"!

17

THAT'S NOT TRUE!
WELL I DIDN'T DO MUCH, THOUGH

IT'S ALL THANKS TO EVERYONE'S HELP!

It's not like I've done something super or bad, just that being thanked make me feels a bit uneasy.
?
But I had some reason for that...
I GUESS SO HUH
I WAS REALLY THANKFUL THAT SHIRANUI AND DR MIYABI WAS THERE FOR ME, OTHERWISE I DON'T KNOW WHAT TO IF I WERE BY MYSELF

I-I SEE
WE'RE MEANT TO GO TO OUR APPOINTMENT TOGETHER, BUT THE NURSE CALLED US BACK
YEAH
SHE-SENPAI!
SO YOU TWO HAVEN'T GONE HOME YET
THE MIYABI
To be frank, I had some ulterior motives in me going home together with Dr Miyabi...

10

to secretly find out who's the most appropriate for the "Best Doctor" title in this hospital.

N-NOTHING
? IS THERE ANYTHING WRONG?
As instructed by Chairman Takita.

5

BLAST Comic

TRANSLATOR
SHOUGEI

PROOFREADER
KUMIKO

CLEANER
FIRSTBLOOD116

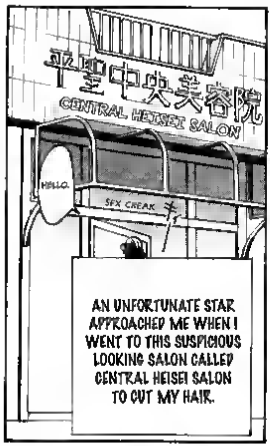
RE-DRAWER
DJIDANEZOKAWA

TYPESETTER
AINE

DISCLAIMER:
SINCE OUR STAFFS ARE NOT DOCTORS OR WORKING IN MEDICAL RELATED FIELD, SOME MEDICAL TERMS ARE BOUND TO BE MISTAKEN. IF YOU EVER FIND ANY, KINDLY TELL US AND WE'LL FIX IT RIGHT AWAY. THANKS

VISIT OUR WEBSITE AT:
HTTPS://BLASTCOMICSCANS.WORDPRESS.COM/

5



I'M USUALLY KNOWN AS DANDY MIDDLE-AGED SAKATAMOTO RYUUMAHEI

AN UNFORTUNATE STAR APPROACHED ME WHEN I WENT TO THIS SUSPICIOUS LOOKING SALON CALLED CENTRAL HEISEI SALON TO CUT MY HAIR.

EXTRA
THE BEST SKILLED BEAUTICIAN

1

1

HOWEVER I...
I'M QUITE OLD ALREADY SO I'D LIKE SOMETHING RETRO
PLEASE GIVE A CREW-CUT
GOT THAT.
LIKE SKIN HEAD RATHER THAN CREW-CUT.
2
WELL, YOU DO HAVE A POINT BUT
EKH, WHY?! YOUR CUSTOMER SAID HE WANTS CREW-CUT SO GET A CREW-CUT!
I SEE, SKIN HEAD, HUH
SO LET'S DO SKIN HEAD

WHAT I'M CUTTING IS SKIN HEAD
WHAT KIND OF RULE?
THIS IS MY OWN RULE.
HUH?
3
DON'T DECIDE SOMETHING SO FAR AHEAD!
I'VE DECIDED
WHENEVER IT IS, I'M CUTTING NOT ONLY FOR NOW BUT ALSO FOR 20 OR 30 YEARS AHEAD.
NOPE I'LL CUT SKIN HEAD AS WELL
BESIDES, WHAT YOU'RE CUTTING IS NOT SKIN HEAD BUT THE HAIR!

I DON'T CARE ABOUT MEDICAL LICENSE.
DON'T YOU NEED MEDICAL LICENSE TO DO THAT?
HUH?
SINCE WE ALSO DO HAIR TRANSPLANTATION
EVEN WITHOUT IT I STILL CAN TRANSPLANT HAIR.
ISN'T THAT A LAW VIOLATION?!
HOW COULD THERE BE SUCH ABSURD THING?!
THEN, TO TURN THAT OVER...
FROM TODAY ON, THIS IS THE COMMON THING!
!?

I'M BETTING ON MY REPUTATION AS A BEAUTICIAN IN THIS HAIR TRANSPLANT!

OI, HOLD IT THERE!
FIRST WE'LL SKIN YOUR HEAD THEN TRANSPLANT NEW HAIR.

IF THAT DOESN'T WORK EITHER, THE REST IS ONLY INSTINCTS AND GUESSES.
WHATCHA GONNA DO IF IT FAILS?!

5

AND SO... MY HAIR WAS VIOLENTLY FORCED TO THICKEN A BIT.
NNOOOOOO!!!
HERE I GO!
CENTRAL HEART SALON